

NATIONAL FAMILY HEALTH SURVEY 2005-2006 (NFHS-3), INDIA

Interviewer's Manual



**International Institute for Population Sciences
Mumbai**

January 2006

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I. INTRODUCTION

The 2005-2006 National Family Health Survey (NFHS-3) is a national sample survey designed to provide information on population, family planning, maternal and child health, child survival, AIDS and sexually transmitted infections (STIs), nutrition of children, women and men and women's status in India. NFHS-3 will involve interviewing a randomly selected group of women who are between 15 and 49 years of age and men who are between 15 and 54 years of age. Women and men will be asked questions about their background, the children they have given birth to, their knowledge and use of family planning methods, the health of their children, AIDS and sexually transmissible diseases, and other information that will be helpful to policy-makers and administrators in health and family planning fields.

You are being trained as an interviewer for NFHS-3. After the training course, which will take about four weeks to complete, you along with other interviewers who have been selected to implement NFHS-3, will be working in teams and going to different parts of the state to interview households and men and women in these households. This is called fieldwork. Depending on the areas assigned to your team and on how well you perform the tasks given to you, you may be working on NFHS-3 for up to three months. However, we have recruited more interviewers to participate in the training course than are needed to do the work, and at the end of the course, we will be selecting the best qualified among you to work as interviewers. Those not selected may be retained as alternates or data entry staff.

During the training course, you will be listening to lectures about how to fill in the questionnaires correctly. You will also be conducting practice interviews with other trainees and with strangers. You will be given periodic tests, and the questionnaires that you complete will be edited to check for completeness and accuracy.

You should study this manual and learn its contents since this will reduce the amount of time needed for training and will improve your chances of being selected as an interviewer.

A. SURVEY OBJECTIVES

India's third National Family Health Survey (NFHS-3), like its predecessors, NFHS-1 (conducted in 1992-93) and NFHS-2 (conducted in 1998-99), will be conducted under the stewardship of the Ministry of Health and Family Welfare (MOHFW), Government of India (GOI), coordinated by the International Institute for Population Sciences (IIPS), Mumbai, and implemented by renowned survey organizations and Population Research Centres. Technical Assistance for NFHS-3 will again be provided by Macro International, USA. The overall objectives of the NFHS programme are:

- To strengthen India's demographic and health database by estimating reliable state-level and national-level indicators of population, maternal and child health, HIV/AIDS, and nutrition;
- To facilitate evidence-based decision making in population, health and nutrition;
- To strengthen the survey research capabilities of Indian institutions and to provide high quality data to policymakers, family welfare and health programme managers, government agencies, NGOs, international agencies, and researchers.

Each successive round of the NFHS has had two specific goals: a) to provide essential data on health and family welfare needed by the Ministry of Health and Family Welfare and other agencies for policy and programme purposes, and b) to provide information on important emerging health and family welfare issues. To meet the first of these two aims, NFHS-3, like NFHS-1 and NFHS-2, will:

- Provide estimates of the levels of fertility, infant and child mortality, and other family welfare and health indicators by background characteristics at the national and state levels; and
- Measure trends in family welfare and health indicators over time at the national and state levels.

NFHS-3 will also provide information on several new and emerging issues including:

- perinatal mortality, male involvement in family welfare, adolescent reproductive health, high-risk sexual behaviour, family life education, safe injections, tuberculosis, and malaria;
- family welfare and health conditions among slum dwellers; and
- HIV prevalence for adult women and men at the national level, for each of the six high HIV prevalence states, namely, Andhra Pradesh, Karnataka, Maharashtra, Manipur, Nagaland, and Tamil Nadu and for Uttar Pradesh.

B. NFHS-3 SAMPLE

There are several ways to gather information about people. One way is to contact every person or nearly every person and ask them questions about what you need to know. Talking to everyone is called a complete enumeration, and a national census is a good example of this type of information gathering. This is very costly because it takes a lot of people to talk to everyone. However, in cases such as a national census, it is necessary to have a complete enumeration despite the cost.

Another way to collect information is through a sample survey. When it is not necessary to know exact total numbers, a sample survey can collect information about people much more quickly and cheaply. The sampling procedure allows us to collect data on a small number of people and draw conclusions that are valid for the whole country.

The accuracy of a sample survey depends, among other things, on the size of the sample. The exact number to be interviewed for any survey is determined by statistical methods which we will not try to discuss in this training session. What you should know, however, is that the sample size for this survey reflects the number of interviews that are needed to provide an accurate picture of the population, health and nutrition situation in India. Consequently, it is critical to a survey that fieldworkers try their hardest to complete all assigned interviews to ensure that the correct number of people are included in the survey and that they conduct interviews in the preselected households as instructed.

The accuracy of a sample survey also depends on another major factor: the absence of bias that would affect the proportions found through the sample. To control or prevent bias from creeping into the results, the selection of people included in the sample must be absolutely random. This means that every person in the total population to be studied has the same opportunity to be selected in the sample. This is why it is so important to make callbacks to reach those people who are not at home, since they may be different from people who are at home. For example, it may be that women who have no children are more likely to be working away from the house, and if we don't call back to interview them, we may bias the fertility estimates.

For NFHS-3, the sample consists of almost 4,000 clusters (small geographically defined areas) throughout the country. The households in each of these clusters have recently been listed or

enumerated. A sample of households was then scientifically selected to be included in the NFHS-3 survey from the list in each of the clusters. Each of these households will be visited and information obtained about the household with the Household Questionnaire. Women age 15-49 years will be interviewed using the Woman's Questionnaire. We expect to interview over 140,000 women in this survey. In addition, the Man's Questionnaire will be used to interview about 95,000 men age 15-54. Studying the fertility, health, and family planning behaviour and attitudes of these women and men will provide insights into the behaviour and attitudes of persons in India.

C. SURVEY ORGANIZATION

NFHS-3 is a comprehensive survey involving several agencies and many individuals. The International Institute for Population Sciences (IIPS), Mumbai, has the major responsibility for coordinating the survey operations throughout the country. 18 Research Organizations will conduct and coordinate survey operations in various states.

Financial support for NFHS-3 is being provided by USAID, DfID, the Bill and Melinda Gates Foundation, UNICEF and UNFPA. The Demographic and Health Research Division of Macro International (Macro) will provide technical assistance for all phases of the survey.

During the NFHS-3 fieldwork, you will work in a team consisting of 8 members (2 or 3 female interviewers, 1 or 2 male interviewers, a supervisor, a field editor and 2 health investigators). Each team will be accompanied by a driver. Each supervisor will be responsible for a team of interviewers. The supervisor will be assisted by the field editor, who will be in charge of the team in the absence of the supervisor and will edit each and every questionnaire in the field. Any problems that the field editor points about with your questionnaires need to be corrected in the field. This can involve revisiting the respondent if necessary. The specific duties of the supervisor and the field editor are described in detail in the Supervisor's and Editor's Manual.

The two health investigators (HI) on each team will be responsible for measuring height and weight (anthropometric measurements) and anaemia testing of eligible women, men, and children and for drawing blood from eligible women and men for HIV testing. All interviewers will be trained to assist the health investigators in taking the height and weight measurements.

In the central office there will be a team of state coordinators responsible for supervising fieldwork teams. These coordinators will ensure regular progress of data collection in the clusters. They will also monitor data quality and provide for the regular transfer of completed questionnaires to the central office and blood samples to blood collection centres. Data entry staff and computer programmers will also be assigned to the project.

D. SURVEY QUESTIONNAIRES

The households that have been scientifically selected to be included in the NFHS-3 sample will be visited and enumerated using a Household Questionnaire. The Household Questionnaire consists of a cover sheet to identify the household and a form, called the Household Schedule, on which all members of the household and visitors are listed. Using this form, some information about each of the persons listed is collected, such as name, sex, age, education, and survival of parents for children under age 18 years. The Household Questionnaire also collects information on housing characteristics such as type of water, sanitation facilities, quality of housing, type of cooking fuel, and ownership of various assets.

The Household Questionnaire permits the interviewer to identify women and men who are eligible for individual interviews. Women age 15-49 years in every selected household who are members of the household (those that usually live in the household) and visitors (those who do not usually live in the household but who stayed there the previous night) are eligible to be

interviewed with the Woman's Questionnaire by the female interviewers on the team. Additionally, in households selected for the men's interview, all men age 15-54 who are either usual residents of the household or visitors who spent the night in the household, are eligible to be interviewed using the Man's Questionnaire by the male interviewers. Eligible women, men, and children will also be eligible for the height/weight measurements and anaemia testing to assess their nutritional status. All children in the household who were born in 2001 or later will be eligible for the height/weight measurements, and all children age 6 months to five years, will be eligible for the anaemia testing. In addition, in every sample household or in a subsample (depending on which state you are working in), all eligible women and men in the household will be selected for HIV testing.

After all of the eligible women in a household have been identified, you will use the Woman's Questionnaire to interview the women you are assigned or if you are a man, you will use the Man's Questionnaire to interview the men you are assigned. The Woman's Questionnaires collect information on many topics, including the following:

- Background characteristics. Questions on age, marital status, education, literacy, employment status, occupation, media exposure, religion, and caste/tribe, and duration of residence are included in order to provide information on characteristics likely to influence women's behaviour.
- Reproductive behaviour and intentions. Data are collected on the dates of birth and survival status of live births, non-live births (stillbirths, miscarriages, and abortions), current pregnancy status, and future childbearing intentions.
- Knowledge and use of contraception. Questions are designed to determine knowledge and use of specific family planning methods. Women who are not using family planning are asked their intentions for future use.
- Availability of family planning. Questions are included to determine where a user obtained her family planning method and whether nonusers know of places to get family planning methods.
- Children's health. Questions are included on immunizations and recent occurrences of diarrhoea, fever, and cough for all children born in 2001 or later.
- Feeding practices for children. Questions include information on breastfeeding and child nutrition.
- Women's health. Information is collected on antenatal care, delivery care, and postnatal care.
- AIDS and sexually transmitted infections (STIs). Questions assess knowledge of AIDS and other STIs.
- Knowledge and attitudes concerning tuberculosis. Questions include knowledge of tuberculosis and how it is spread and stigma toward related to TB.
- Sexual life. Information is collected on recent and lifetime sexual partners.
- Household Relations. Questions are asked about whether the woman has been beaten or hit.

Several of these topics are also covered in the Man's Questionnaire and about 70-80 percent of questions that are asked of men are also asked of women.

E. INTERVIEWER'S ROLE

The interviewer occupies the central position in NFHS-3 because she/he collects information from respondents. Therefore, the success of NFHS-3 depends on the quality of each interviewer's work.

In general, the responsibilities of an interviewer include the following:

- Locating the structures and households in the sample, and completing the Household Questionnaire
- Identifying all eligible women and men in those households
- Interviewing all eligible persons in the households using the relevant individual questionnaire
- Checking completed interviews to be sure that all questions were asked and the responses are neatly and legibly recorded
- Returning to households to interview respondents who could not be interviewed during the initial visit

These tasks will be described in detail throughout this manual.

F. TRAINING OF INTERVIEWERS

Although some people are more adept at interviewing than others, one can become a good interviewer through experience. Your training will consist of a combination of classroom training and practical experience. Before each training session, you should study this manual carefully along with the questionnaires, writing down any questions you have. Ask questions at any time to avoid mistakes during actual interviews. Interviewers can learn a lot from each other by asking questions and talking about situations encountered in practice and actual interview situations.

Each of you will receive a package with the following materials.

- Household Questionnaire
- Woman's/Man's Questionnaire
- Interviewer's Training Manual

Please ensure that you bring these materials each day during the training and to the field during fieldwork.

During the training, the questionnaire sections, questions, and instructions will be discussed in detail. You will see and hear demonstration interviews conducted in front of the class as examples of the interviewing process. You will practice reading the questionnaire aloud to another person several times so that you may become comfortable with reading the questions aloud. You will also be asked to take part in role playing in which you practice by interviewing another trainee.

The training also will include field practice interviewing in which you will actually interview household respondents and eligible women or men. You will be required to check and edit the

questionnaires just as you would do in the actual fieldwork assignments.

You will be given tests to see how well you are progressing during your formal training period. At the end of the training course, the interviewers will be selected based on their test results and performance during the field practice.

The training you receive as an interviewer does not end when the formal training period is completed. Each time a supervisor or field editor meets with you to discuss your work, your training is being continued. This is particularly important during the first few days of fieldwork. As you run into situations you did not cover in training, it will be helpful to discuss them with your team. Other interviewers may be running into similar problems, so you can all benefit from each other's experiences.

G. SUPERVISION OF INTERVIEWERS

Your team supervisor and the field editor will play very important roles in ensuring the quality of the NFHS-3 data. They will:

- Spot-check some of the addresses selected for interviewing to be sure that you interviewed the correct households and the correct women/men
- Review each questionnaire to be sure it is complete and consistent
- Observe some of your interviews to ensure that you are asking the questions in the right manner and recording the answers correctly
- Meet with you on a daily basis to discuss performance and give out future work assignments
- Help you resolve any problems that you might have with finding the assigned households, understanding the questionnaire, or dealing with difficult respondents.

The survey director may terminate the service of any interviewer who is not performing at the level necessary to produce the high-quality data required to make NFHS-3 a success.

H. NFHS-3 REGULATIONS

During the next few weeks, your presence, interest, participation, and cooperation are absolutely vital. For the workload to be equally divided and the support equally shared, the following survey regulations have been established and will be strictly enforced:

1. Except for illnesses, any person who is absent from duty during any part of the training or any part of the fieldwork (whether it is a whole day or part of a day) without prior approval from supervisor may be dismissed from the survey.
2. The selection of the survey team members is competitive; it is based on performance, ability, and testing results during the training. Therefore, any person found offering assistance to or receiving assistance from another person during tests will be dismissed from the survey.
3. Throughout the survey training and the fieldwork period, you are representing IIPS and the Research Organization you are working for. Your conduct must be professional and your behaviour must be congenial in dealing with the public. We must always be aware of the fact that we are only able to do our work with the good will and cooperation of the people we interview. Therefore, any team member who is consistently overly aggressive, abrupt, or

disrespectful to the people in the field may be dismissed from the survey team.

4. For the survey to succeed, each team must work closely together, sharing in the difficulties and cooperating and supporting each other. We will attempt to make team assignments in a way that enhances the cooperation and good will of the team. However, any team member who in the judgment of the survey director creates a disruptive influence on the team may be asked to transfer to another team or may be dismissed from the survey.
5. It is critical that the data gathered during the fieldwork be both accurate and valid. To control for inaccurate or invalid data, spot checks will be conducted. Interviewers may be dismissed at any time during the fieldwork if their performance is not considered adequate for the high quality this survey demands.
6. Vehicles and fuel are provided for the survey for official use only. Any person using the vehicle for an unauthorized personal reason will be dismissed from the survey.
7. NFHS-3 data are confidential. **They should not be discussed with anyone, including your fellow interviewers.** Under no circumstances should confidential information be passed on to third parties. Persons breaking these rules, and therefore the confidence placed in them by the respondents, will be dismissed.

II. CONDUCTING AN INTERVIEW

Successful interviewing is an art and should not be treated as a mechanical process. Each interview is a new source of information, so make it interesting and pleasant. The art of interviewing develops with practice but there are certain basic principles that are followed by every successful interviewer. In this section you will find a number of general guidelines on how to build rapport with a respondent and conduct a successful interview.

A. BUILDING RAPPORT WITH THE RESPONDENT

The supervisor will assign an interviewer to make the first contact with each of the households selected for NFHS-3. Any capable adult member of the household is a suitable respondent for the household interview (this person may or may not be a woman age 15-49 or a man age 15-54). All eligible persons identified in the Household Questionnaire will be interviewed with a Woman's/Man's Questionnaire.

As an interviewer, your first responsibility is to establish good rapport with a respondent. At the beginning of an interview, you and the respondent are strangers to each other. The respondent's first impression of you will influence his/her willingness to cooperate with the survey. Be sure that your manner is friendly as you introduce yourself. Before you start to work in an area, your supervisor will have informed the local leaders. You will also be given a letter and an identification badge that clearly states who you are working for.

1. **Make a good first impression.**

Do your best to make the respondent feel at ease. With a few well-chosen words, you can put the respondent in the right frame of mind for the interview. Open the interview with a smile and greeting such as "Namaste" and then proceed with your introduction which is the informed consent statement at the start of each questionnaire.

These introductory statements in the Household Questionnaire, in the Woman's Questionnaire and the Man's Questionnaire should be read exactly as they are printed in the questionnaires.

2. **Always have a positive approach.**

Never adopt an apologetic manner, and do not say things like "Are you too busy?" Such questions invite refusal before you start.

3. **Stress confidentiality of responses when necessary.**

If the respondent is hesitant about responding to the interview or asks what the data will be used for, explain that the information you collect will remain confidential, no individual names will be used for any purpose, and all information will be grouped together to write a report about the health and welfare of the nation's population. Also, you should never mention other interviews or show completed questionnaires to the supervisor or field editor in front of a respondent or any other person.

4. **Answer any questions from the respondent frankly.**

Before agreeing to be interviewed, the respondent may ask you some questions about the survey or how the household she/he was selected to be interviewed. Be direct and pleasant when you answer.

The respondent may also be concerned about the length of the interview. Indicate your

willingness to return at another time if it is inconvenient for the respondent to answer questions then.

After addressing any concerns, give the respondent the card with the address of the Director, IIPS. Reassure the respondent further by explaining that the card has contact information if they have any questions later.

During the interview, the respondent may ask questions or want to talk further about the topics you bring up, e.g., about specific family planning methods. It is important not to interrupt the flow of the interview so explain that you will be happy to answer questions or talk further after the interview.

5. Interview the respondent alone.

For the individual interviews, the presence of a third person during an interview can prevent you from getting frank, honest answers from a respondent. It is, therefore, very important that the individual interview be conducted privately.

If other people are present, explain to the respondent that some of the questions are private and ask to interview the person in the best place for talking alone. Sometimes asking for privacy will make others more curious, so they will want to listen; you will have to be creative. Establishing privacy from the beginning will allow the respondent to be more attentive to your questions.

If it is impossible to get privacy, you may have to carry out the interview with the other people present. However, in such circumstances, it is important that you remember that:

- If there is more than one eligible person (woman or man) in the household, you must not interview one in the presence of the other
- You must omit certain questions which you are instructed in the questionnaire to ask only if you have total privacy
- Extra effort should be made to gain privacy if the other person is of the opposite sex.

In all cases where other individuals are present, try to separate yourself and the respondent from the others as much as possible.

B. TIPS FOR CONDUCTING THE INTERVIEW.

1. Be neutral throughout the interview.

Most people are polite and will tend to give answers that they think you want to hear. It is therefore very important that you remain absolutely neutral as you ask the questions. Never, either by the expression on your face or by the tone of your voice, allow the respondent to think that she/he has given the “right” or “wrong” answer to the question. Never appear to approve or disapprove of any of the respondent’s replies.

A respondent may ask you questions during the interview, for example, about certain contraceptive methods or treatments for diseases. Or she may ask you about your use of family planning or your ideal family size. Explain that we are interested in her opinions and that you are willing to talk to her after the interview.

The questions are all carefully worded to be neutral. They do not suggest that one

answer is more likely or preferable to another answer. If you fail to read the complete question, you may destroy that neutrality. For example, the following is a question in NFHS-3: “Would you like to have another child or would you prefer not to have any more children?” It is a neutral question. However, if you only ask the first part—“would you like to have another child?”—you are more likely to get a “YES” answer. This is what we call a “leading question.” That is why it is important to read the whole question as it is written.

If the respondent gives an ambiguous answer, try to probe in a neutral way, asking questions such as the following:

“Can you explain a little more?”

“There is no hurry. Take a moment to think about it.”

“If you are unclear, I can read the question again.”

2. Never suggest answers to the respondent.

If a respondent’s answer is not relevant to a question, do not prompt her by saying something like “I suppose you mean that. . . Is that right?” In many cases, she will agree with your interpretation of her answer, even when that is not what she meant. Rather, you should probe in such a manner that the respondent herself comes up with the relevant answer. You should never read out the list of coded answers to the respondent, even if she has trouble answering.

3. Do not change the wording or sequence of questions.

The wording of the questions and their sequence in the questionnaire must be maintained. If the respondent has not understood the question, you should repeat the question slowly and clearly. If the respondent still does not understand, you may reword the question, being careful not to alter the meaning of the original question. Provide only the minimum information required to get an appropriate response.

4. Handle hesitant respondents tactfully.

There will be situations where the respondents simply say, “I don’t know”, give an irrelevant answer, act very bored or detached, or contradict something they have already said. In these cases, you must try to re-interest them in the conversation. For example, if you sense that they are shy or afraid, try to remove their shyness or fear before asking the next question. Spend a few moments talking about things unrelated to the interview (for example, their town or village, the weather, their daily activities, etc.).

If the woman or man is giving irrelevant or elaborate answers, do not stop them abruptly or rudely, but listen to what they have to say. Then try to steer them gently back to the original question. A good atmosphere must be maintained throughout the interview. The best atmosphere for an interview is one in which the respondent sees the interviewer as a friendly, sympathetic, and responsive person who does not intimidate them and to whom they can say anything without feeling shy or embarrassed. As indicated earlier, a major problem in gaining the respondent’s confidence may be one of privacy. This problem can be prevented if you are able to obtain a private area in which to conduct the interview.

If the respondent is reluctant or unwilling to answer a question, try to overcome the reluctance, explaining once again that the same question is being asked of women or men all over India and that the answers will all be merged together. If they still refuse, simply write REFUSED next to the question and proceed as if nothing had happened. If

you have successfully completed the interview, you may try to obtain the missing information at the end, but do not push too hard for an answer. Remember, the respondent cannot be forced to give an answer.

5. Do not form expectations.

You must not form expectations of the ability and knowledge of the respondent. For example, do not assume that women and men from rural areas or those who are less educated or illiterate do not know about various family planning methods.

6. Do not hurry the interview.

Ask the questions slowly to ensure the respondents understand what they are being asked. After you have asked a question, pause and give them time to think. If the respondents feel hurried or are not allowed to formulate their own opinion, they may respond with “I don’t know” or give an inaccurate answer. If you feel the respondent is answering without thinking just to speed up the interview, say to the respondent, “There is no hurry. Your opinion is very important, so consider your answers carefully.”

7. Use diversionary tactics if necessary

If someone walks in when you are asking some sensitive question that requires that complete privacy be maintained, gently change the topic till the person is no longer within hearing distance.

C. LANGUAGE OF THE INTERVIEW

The questionnaires for NFHS-3 have been translated into 18 languages. However, there may be times when you will have to use an interpreter or modify the wording of the questions to fit local dialects and culture. It is very important not to change the meaning of the question when you rephrase it or interpret it into another language. We will be practicing interviews in the local languages during training.

Of course, one of the first things you will do when you approach a household to do an interview is to establish the language or languages that are spoken there. We will be arranging the field teams in such a way that you will be working in an area in which your language is spoken, so there should not be many cases in which respondents do not speak your language. In such cases you might be able to find another language that both of you speak and you will be able to conduct the interview in that language.

However, in some cases, it will not be possible for you to find a language which both you and the respondent speak. In this case, try to find out if the respondent speaks a language which another member of your team or the team supervisor speaks. If so, tell your supervisor so that he or she can arrange for that person to conduct the interview.

If the respondent does not speak a language which any of your team members speak, you will need to rely on a third person to translate for you. Since the interview involves some sensitive topics, it is best if you can find another woman to act as an interpreter if you are conducting the Woman’s interview and a man if you are conducting the man’s interview. You should not use the respondent’s spouse as an interpreter under any circumstances. Children are also unsuitable interpreters. Remember, try to avoid using interpreters if at all possible since this can jeopardize the quality of the interview.

III. FIELDWORK PROCEDURES

Fieldwork for NFHS-3 will proceed according to a timetable, and the survey will be successful only if each member of the interviewing team understands and follows correct field procedures. The following sections review these procedures and describe the proper procedures for receiving work assignments and keeping records of selected households.

A. PREPARATORY ACTIVITIES AND ASSIGNMENT SHEETS

1. Interviewer Assignment Sheets

Each morning, your supervisor will brief you on your day's work and explain how to locate the households assigned to you. When your supervisor assigns households to you, you should write the identification information on the Interviewer's Assignment Sheet (see Figure 1). The identifying information (household number, address, name of the head of the household) and date of assignment will be written in Columns (1) through (4). In Column (5), you will note whether the household is selected for the men's interviews.

Columns (6) through (14) of the Interviewer's Assignment Sheet serve as a summary of the results of the fieldwork for each household. At the end of the day, you will be responsible for recording in these columns the final outcome for all household visits and individual interviews you have conducted.

When you receive your work assignment, review it and ask any questions you might have; remember that your supervisor will not always be available to answer questions when the work begins. You should be sure that:

- Columns (1) through (5) of your Interviewer's Assignment Sheet are complete and that they contain all the information you will need to identify the selected households
- You have a Household Questionnaire for each household you are assigned
- You fill in the identification information on the cover page of each Household Questionnaire
- You know the location of the selected households you are to interview and have sufficient materials (maps, written directions, etc.) to locate them
- You have several blank Woman's and Man's Questionnaires.

After completing a household interview, you will record the final result of the interview in Column (6), the number of eligible women in Column (7) and eligible men in Column (8), and the names and line numbers of any eligible women in Columns (9) and (10) and eligible men in Columns (12) and (13). If there are more than three eligible women or men in a household, copy all the information from the first eight columns for that household to the row after the last household you have been assigned and use the rows for two or three households to record the information for that household. This will allow the recording of six or nine eligible women or men respectively. Then go back to the row for the original assignment of that household and cross out all the information in that row so that the household will appear only once on your Interviewer's Assignment Sheet. Allocate a Woman's Questionnaire for each eligible woman identified in the household and a Man's Questionnaire for each eligible man identified in the household (if the household is eligible for the men's interviews). Fill in the identification information on the cover sheet of the Woman's and Man's Questionnaires (if the household has been selected for the men's interview) for each eligible woman/man identified in the Household Schedule.

If you are a female interviewer, after completing an interview with an eligible woman, you will record the final result of the interview in Column (11) of your Interviewer's Assignment Sheet. As the interviewer assigned to that household, it is your responsibility to ensure that the male interviewer is notified of any eligible men who need to be interviewed. After the male interviewer has completed his work, write the results for each eligible man in Column (14).

You will return the completed Household Questionnaire to your supervisor with any filled in Woman's Questionnaires and Man's Questionnaires placed inside.

If you are a male interviewer, after completing an interview with an eligible man, you will record the final result of the interview in Column (14) of your Interviewer's Assignment Sheet. As the interviewer assigned to that household, it is your responsibility to ensure that the female interviewer is notified of any eligible women who need to be interviewed. After the female interviewer has completed her work, write the results for each eligible woman in Column (11).

You will return the completed Household Questionnaire to your supervisor with filled-in Man's Questionnaires and Woman's Questionnaires placed inside.

During the fieldwork in a cluster, it is important that, for each household you are assigned, you keep the Household and all Individual Questionnaires together. Always place the Woman's and Man's Questionnaire(s) inside the Household Questionnaire. If there is more than one questionnaire, organize the questionnaires sequentially according to the respondents' line numbers in the household schedule.

2. Making callbacks

Because each household has been carefully selected, you must make every effort to conduct interviews with the eligible women and men identified. Sometimes a household member will not be available at the time you first visit. You need to make *at least* 3 visits at three different times of the day or days when trying to obtain a household and/or an individual interview to maximize the possibility of successfully completing the household/individual interview.

At the beginning of each day, you should examine the cover sheets of your questionnaires to see if you made any appointments for revisiting a household or eligible respondent. If no appointments were made, make your callbacks to a respondent at a different time of day than the earlier visits. For example, if the initial visit was made in the early afternoon, you should try to arrange your schedule so you make a callback in the morning or late afternoon. Scheduling callbacks at different times is important in reducing the rate of non-response (i.e., the number of cases in which you fail to contact a household or complete a woman's or man's interview). For men in particular, you will have to conduct some interviews in the late evening.

FIGURE1: NFHS-3 INTERVIEWER'S ASSIGNMENT SHEET

PAGE _____ OF _____ PAGES

STATE	<input type="text"/>	PSU NUMBER	<input type="text"/>	DISTRICT				TEHSIL/ TALUK				CITY/ TOWN/ VILLAGE				SIZE OF PLACE	<input type="checkbox"/>
INTERVIEWER'S NAME				INTERVIEWER NUMBER				NO. OF WOMEN'S QUESTS.				NO. OF MEN'S QUESTS.				1. MEGA CITY 2. LARGE CITY 3. SMALL CITY 4. LARGE TOWN 5. SMALL TOWN 6. RURAL	
HOUSEHOLDS								WOMEN			MEN			NOTES			
NFHS-3 HOUSEHOLD NUMBER	STRUCTURE NUMBER OR ADDRESS	NAME OF HEAD OF HOUSEHOLD	DATE ASSIGNED	HOUSEHD SELECTED FOR MEN'S INTERVIEW?	FINAL RESULT	TOTAL ELIGIBLE WOMEN	TOTAL ELIGIBLE MEN	NAME OF ELIGIBLE WOMAN	LINE NUMBER OF ELIG. WOMAN	INTERVIEW FINAL RESULT	NAME OF ELIGIBLE MAN	LINE NUMBER OF ELIG. MAN	INTERVIEW FINAL RESULT				
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)			
				Y N													
				Y N													
				Y N													
				Y N													
				Y N													

CODES FOR COLUMN (6)

CODES FOR COLUMN (11) AND (14)

1 COMPLETED
2 NO HH MEMBER AT HOME/NO COMPETENT RESPONDENT
3 ENTIRE HH ABSENT FOR EXTENDED PERIOD
4 POSTPONED
5 REFUSED

6 DWELLING VACANT/ADDRESS NOT A DWELLING
7 DWELLING DESTROYED
8 DWELLING NOT FOUND
9 OTHER

1 COMPLETED
2 NOT AT HOME
3 POSTPONED
4 REFUSED

5 PARTLY COMPLETED
6 INCAPACITATED
7 OTHER

3. Supplies and documents needed for fieldwork

Before starting fieldwork each morning, verify that you have everything you need for the day's work. Some necessary supplies include:

- A sufficient number of Household and Individual Questionnaires
- Interviewer's Assignment Sheet
- Interviewer's Manual
- Literacy card
- Samples of iron and folic acid tablets/syrups, vitamin A capsules/syrups, and ORS packets
- Salt-test kits
- Cards with contact information for IIPS director
- Your personnel identification
- Something hard to write on
- Blue ink pens
- A bag to carry questionnaires and all other materials

B. CONTACTING HOUSEHOLDS

1. Locating sample households

In recent months, household listing teams visited each of the selected sample clusters to carry out the following activities:

- 1) prepare up-to-date maps to indicate the location of structures;
- 2) record address information for each structure or describe their location (for areas lacking street names or numbers on structures);
- 3) write numbers on structures; and
- 4) make a list of the names of the heads of households in all of the structures.

A structure is a freestanding building, for a residential or commercial purpose. It may have one or more rooms in which people live; it may be an apartment building, a house, or a thatched hut, for instance.

Within a structure, there may be one or more dwelling (or housing) units. For instance, there would be one dwelling unit in a thatched hut, but there may be 50 dwelling units in an apartment building or five dwelling units in a compound. A *dwelling unit* is a room or group of rooms occupied by one or more households. It may be distinguished from the next dwelling unit by a separate entrance.

Within a dwelling unit, there may be one or more households. For example, a compound may have five households living in it, and each household may live in its own dwelling unit. By definition, a *household* consists of a person or group of persons, related or unrelated, in the same dwelling unit who usually live together and eat together. In some cases one may find a group of people living together in the same house, but each person has separate eating arrangements; they should be counted as separate one-person households. Collective living arrangements such as hostels, army camps, boarding schools, or prisons are not considered as households in NFHS-3.

Specific households have been selected to be interviewed, and you should not have any trouble in locating the households assigned to you if you use the structure number and the name of the head of the household to guide you. The structure number is usually written above the door of

the house, but sometimes it may be on the wall. Although the supervisor of your team will be with you in the field, it is important that you also know how to locate the structures in the sample by using the sketch map.

2. Problems in contacting a household

In some cases you will have problems locating the households that were selected because the people may have moved or the listing teams may have made an error. Here are examples of some problems you may find and how to solve them:

- a) The selected household has moved away and the dwelling is vacant. If a household has moved out of the dwelling where it was listed and no one is living in the dwelling, you should consider the dwelling vacant and record Code '6' on the cover sheet of the Household Questionnaire (DWELLING VACANT OR ADDRESS NOT A DWELLING).
- b) The household has moved away and a new one is now living in the same dwelling. In this case, interview the new household.
- c) The structure number and the name of the household head do not match with what you find in the field. If you have located the correct dwelling, you should consider the household living in the dwelling as the selected household.

Example: You are assigned a household headed by Anil Kumar that is listed as living in structure number NFHS-3: 004. But when you go to NFHS-3: 004, the household living there is headed by Basant Singh. After checking that you have not made a mistake about the structure or dwelling unit, you should interview the household headed by Basant Singh.

- d) The household selected does not live in the structure that was listed. If there is a discrepancy between the structure number and the name of the household head, interview whoever is living in the structure assigned to you.

Example: You are assigned a household headed by Shiv Rajan located in NFHS-3: 007, and you find that the Rajan household actually lives in structure NFHS-3: 028. Interview the household living in NFHS-3: 007.

- e) The listing shows only one household in the dwelling, but two or more households live there now. When the listing shows only one household and you find two households, interview both households. Make a note on the cover page of the household questionnaire that the household was not on the listing. Your supervisor will assign this household a number, which you should enter on the questionnaire.

If the listing shows two households, only one of which was selected, and you find three households there now, only interview the one that had been selected and ignore the other two.

- f) The head of the household has changed. In some cases, the person listed as the household head may have moved away or died since the listing. Interview the household that is living there.
- g) The house is all closed up and the neighbours say the people are on the farm (or away visiting, etc.) and will be back in several days or weeks. Enter Code '3' (ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME). The house should be revisited at least two more times to make sure that the household members have not returned.

- h) The house is all closed up and the neighbours say that no one lives there; the household has moved away permanently. Enter Code '6' (DWELLING VACANT OR ADDRESS NOT A DWELLING).
- i) A household is supposed to live in a structure that when visited is found to be a shop and no one lives there. Check very carefully to see whether anyone is living there. If not, enter Code '6' (DWELLING VACANT OR ADDRESS NOT A DWELLING).
- j) A selected structure is not found in the cluster, and residents tell you it was destroyed in a recent fire. Enter Code '7' (DWELLING DESTROYED).
- k) No one is home and neighbours tell you the family has gone to the market. Enter Code '2' (NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT), and return to the household at a time when the family will be back.

Discuss with your supervisor any problems you have in locating the households that you are assigned to interview. Remember that the usefulness of the NFHS-3 sample in representing the entire country depends on the interviewers being able to locate and visit all the households they are assigned.

3. Identifying eligible respondents

To be “eligible” means to “qualify” for something. An eligible respondent is someone who is qualified to be included in our survey. You will use the Household Questionnaire to identify who is eligible to be interviewed with the Woman’s and Man’s Questionnaires.

All women age 15-49, and in selected households, all men age 15-54, who are either members of the household *or visitors* are considered eligible in NFHS-3, even if they do not usually live in that dwelling. It is very important that you do not miss an eligible respondent when you fill in the Household Schedule.

In certain cases, you may find it difficult to decide whether or not a woman/man in the household is eligible. Use these examples as a guide:

Example(s): A visitor who spent the previous night in the house but is away at the market when you arrive is eligible. You must make callbacks to interview her/him.

A woman is a usual resident but she spent the previous night away at her sister’s house. She should be counted as a member of the household on the Household Schedule and is eligible for interview.

You must complete the cover page of a Woman’s Questionnaire for each eligible woman that you identify in the household and each eligible man that you identify in the household (if the household has been selected for the men’s interviews) before starting the individual interviews. If you cannot finish an interview for whatever reason, write the reason on the cover page.

Take care to note any information that may be useful when you contact the person later.

In some households, there will be no eligible respondents (i.e., there will be no usual household members or visitors of eligible age). For these households, you will have a completed Household Questionnaire, with no accompanying Woman’s or Man’s Questionnaires.

C. PROBLEMS IN OBTAINING WOMEN'S AND MEN'S INTERVIEWS

You may experience the following types of problems in obtaining an interview with an eligible respondent:

- a) Eligible respondent not available. If the eligible respondent is not at home when you visit, enter Code '2' (NOT AT HOME) as the result for the visit on the cover sheet and ask a neighbour or family member when the respondent will return. You should contact the household at least three times, trying to make each visit at a different time of day. Under no circumstances is it acceptable to conduct all three visits on the same day and then stop attempting to contact the respondent.
- b) Respondent refuses to be interviewed. The respondent's availability and willingness to be interviewed will depend in large part on the initial impression you make when you meet her/him. Introduce yourself and explain the purpose of the visit. Read the introduction and informed consent statement printed on the Woman's/Man's Questionnaire. You may emphasize the confidentiality of the information she/he provides. If the respondent is unwilling to be interviewed, it may be that the present time is inconvenient. Ask whether another time would be more convenient and make an appointment. If the woman/man still refuses to be interviewed, enter a Code '4' (REFUSED) as the result for the visit on the cover sheet and report it to your supervisor.
- c) Interview not completed. A respondent may be called away during the interview or she/he may not want to answer all the questions at the time you visit her/him. If an interview is incomplete for any reason, you should arrange an appointment to see the respondent again as soon as possible to obtain the missing information. Be sure that you record on the cover sheet of the questionnaire that the interview is incomplete by entering Code '5' (PARTLY COMPLETED) and indicate the time you agreed on for a revisit; you should also report the problem to your supervisor.
- d) Respondent incapacitated. There may be cases in which you cannot interview a person because she/he is too sick, because she/he is mentally unable to understand your questions, or because she/he is deaf, etc. In these cases, record Code '6' (INCAPACITATED) on the cover sheet of the questionnaire and on your Assignment Sheet.

The outcome of the final attempt to contact an eligible respondent should be noted in Column (11) for women and Column (14) for men of your Interviewer's Assignment Sheet. It is important that you keep the visit record on the Interviewer's Assignment Sheet accurately since this form provides a summary of all eligible respondents in the NFHS-3 sample. These forms will be returned to the central office for review after completion of interviewing and will be used to calculate response rates.

D. MAKING CALLBACKS

Because each household has been carefully selected, you must make every effort to conduct interviews with the households assigned to you and with the eligible women and men identified. Sometimes a household member will not be available at the time you first visit. You need to make at least three different visits when trying to obtain a household interview and at least three different visits when trying to obtain a woman's interview or a man's interview.

At the beginning of each day, you should examine the cover sheets of your questionnaires to see whether you made any appointments for revisiting a household or eligible respondent. If no appointments were made, make your callbacks to a household or respondent at a different time of day than the earlier visits; for example, if the initial visits were made in the early afternoon,

you should try to arrange your schedule so you make a callback in the morning or late afternoon. Scheduling callbacks at different times is important in reducing the rate of nonresponse (i.e., the number of cases in which you fail to contact a household or complete a woman's or a man's interview).

E. CHECKING COMPLETED QUESTIONNAIRES

It is the responsibility of the interviewer to review each questionnaire when the interview is finished. This review should be done before you leave the household so that you can be sure every appropriate question was asked, that all answers are clear and relevant, and that your handwriting is legible. Also check that you have followed the skip instructions correctly. You can make minor corrections yourself, but any serious error should be clarified by the respondent. Simply explain to the respondent that you made an error and ask the question again.

Do not recopy questionnaires. As long as the answers are clear and readable, it is not necessary that the questionnaire itself be neat. Every time you transcribe the answers to a new questionnaire, you increase the chance of an error. For this reason you are not allowed to use work sheets to collect information. Record ALL information on the questionnaires you have been provided. Any calculations you make should be written in the margins or on the back of the questionnaires.

Anything out of the ordinary should be explained either in the margins near the relevant question or in the comments section at the end. These comments are very helpful to the supervisor and field editor in checking questionnaires. Comments are also read in the office and used to resolve problems encountered during data entry.

F. RETURNING WORK ASSIGNMENTS

At the end of fieldwork each day, check that you have filled out the cover sheet of a Household Questionnaire for each household assigned to you, whether or not you managed to complete an interview. Check also that you have completed the cover sheet of the Individual Questionnaire of each respondent identified, whether you were able to interview them or not. For all of the interviews that you have completed, write the final result on the Interviewer Assignment Sheet and make any notes in Column (15) that may be of help to the supervisor and field editor, such as any problems you experienced in locating a household or completing a Household Questionnaire and in conducting an interview with an eligible respondent. For these difficult cases, at least three visits will be made to a household during NFHS-3 in an effort to obtain a completed interview.

G. DATA QUALITY

It is the responsibility of the field editor to review the Household Questionnaires and the Woman's and Man's Questionnaires from a sample cluster while the interviewing team is still in the cluster. The editing rules followed by the editor are explained in detail in the Supervisor's and Field Editor's Manual. It is especially important for the field editor to conduct thorough edits of questionnaires in the initial stages of fieldwork. The supervisor should assist in editing questionnaires during the first few weeks of fieldwork. The field editor will then discuss with each interviewer the errors found in the collection of data. It may sometimes be necessary to send an interviewer back to a respondent in order to correct some data error.

IV. GENERAL PROCEDURES FOR COMPLETING THE QUESTIONNAIRE

To collect the information needed by NFHS-3, you must understand how to ask each question, what information the question is attempting to collect, and how to handle problems that might arise during the interview. You must also know how to correctly record the answers the respondent gives and how to follow special instructions in the questionnaire. This part of the training manual is designed to familiarize you with the NFHS-3 questionnaire.

A. ASKING QUESTIONS

It is very important that you ask each question exactly as it is written in the questionnaire. When you are asking a question, speak slowly and clearly so that the respondent will have no difficulty hearing or understanding the question. At times you may need to repeat the question to be sure the respondent understands it. In those cases, do not change the wording of the question but repeat it exactly as it is written.

If, after you have repeated a question, the respondent still does not understand it, you may have to restate the question. Be very careful when you change the wording, however, that you do not alter the meaning of the original question.

In some cases, you may have to ask additional questions to obtain a complete answer from a respondent (we call this ‘probing’). If you do this, you must be careful that your probes are ‘neutral’ and that they do not suggest an answer to the respondent. Probing requires both tact and skill, and it will be one of the most challenging aspects of your work as an NFHS-3 interviewer.

B. RECORDING RESPONSES

In NFHS-3, all interviewers will use pens with blue ink to complete all questionnaires. Supervisors and field editors will do all their work using pens with red ink. Never use a pencil to complete the survey questionnaire.

There are three types of questions in the NFHS-3 questionnaire: 1) questions that have precoded responses; 2) questions that do not have precoded responses, i.e., they are “open-ended”; and 3) filters.

1. Questions with precoded responses

For some questions, we can predict the types of answers a respondent will give. The responses to these questions are listed in the questionnaire. To record a respondent’s answer, you merely circle the number (code) that corresponds to the reply. Make sure that each circle surrounds only a single number.

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
106	Have you ever attended school?	YES ① NO 2	→109

In some cases, precoded responses will include an ‘Other’ category. The ‘other’ code should be circled when the respondent’s answer is different from any of the precoded responses listed for the question. Before using the other code, you should make sure the answer does not fit in any of the pre-coded categories. When you circle the code

'other' for a particular question you must always write the respondent's answer in the space provided. If you need more room, use the margins or the comments section at the end. If you use the comments section, write, "see note in comments section" next to that

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
242	Is this time just before her period begins, during her period, right after her period has ended, or halfway between two periods?	JUST BEFORE HER PERIOD BEGINS.....1 DURING HER PERIOD.....2 RIGHT AFTER HER PERIOD HAS ENDED.....3 HALFWAY BETWEEN TWO PERIODS4 OTHER <u>Full moon</u> (6) (SPECIFY) DON'T KNOW.....8	

In some cases, precoded responses will consist of letters instead of numbers. In these cases, it means that you can circle more than one response, if the respondent mentions more than one. Such questions have letters for codes and also have an instruction, RECORD ALL MENTIONED:

Example:

446	Why didn't you deliver in a health facility? PROBE: Any other reason? RECORD ALL MENTIONED.	COSTS TOO MUCH.....(A) FACILITY NOT OPENB TOO FAR/NO TRANSPORTATIONC DON'T TRUST FACILITY/ POOR QUALITY SERVICE.....(D) NO FEMALE PROVIDER AT FACILITY.....E HUSBAND/FAMILY DID NOT ALLOW.....F NOT NECESSARYG NOT CUSTOMARYH OTHER _____ X (SPECIFY)	
-----	---	--	--

2. Recording responses that are not precoded

The answers to some questions are not precoded; in entering the response for these questions, you must write the respondent's answer in the space provided. Usually, you will record a number or date in the boxes provided. There are two ways this is done:

a) For some questions, you will have to choose which are the correct boxes in which to record the response and **only fill in one row**.

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES						
220	IF DEAD: How old was (NAME) when he/she died? IF '1 YEAR', PROBE: How many months old was (NAME)? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.	DAYS1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td></tr></table> MONTHS.....(2) <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>1</td><td>1</td></tr></table> YEARS3 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td></tr></table>			1	1		
1	1							

Whenever the boxes are preceded by codes, you are to fill in boxes for one row only. You must circle the code that identifies the row you have chosen and then fill in the

response for that row. If the respondent said her child died at the age of 11 months, you would circle Code '2' for MONTHS and write the response in the boxes next to MONTHS.

b) For other questions, you **fill in all the boxes** provided.

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES						
215	In what month and year was (NAME) born? PROBE: What is his/her birthday?	MONTH..... <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>4</td></tr></table> YEAR <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>2</td><td>0</td><td>0</td><td>1</td></tr></table>	0	4	2	0	0	1
0	4							
2	0	0	1					

Whenever boxes are provided without having codes in front of them, you provide the information for all the rows. As in the example above, for a child born in April 2001, you record the month and year. Notice that if the response has fewer digits than the number of boxes provided, you fill in leading zeroes. For example, a response of '9' is recorded '09' in two boxes, or if three boxes had been provided, you would record '009'.

There are other cases, however, where you must write down the response in the respondent's own words. Try to record those answers exactly as they are given; if you need to shorten a lengthy description, be careful to keep the meaning accurate, and if necessary, write a note on the bottom or side of the page to explain.

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP		
810	What is your occupation, that is, what kind of work do you mainly do?	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table> <i>Selling fruit in the market</i>			

3. Marking filters

Filters require you to look back to the answer to a previous response and then mark an X in the box. (See Section D.2 for a description of filters.)

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
111	CHECK 109: CODE '2', '3' OR '4' CIRCLED <input type="checkbox"/> v	CODE '1' OR '5' CIRCLED <input checked="" type="checkbox"/>	→113

4. The calendar

The following information is recorded in the calendar located at the end of the Woman's Questionnaire: births, pregnancies, contraceptive methods used, ultrasound tests for

pregnancies, reasons for discontinuing any contraceptive method, and marriages. The information is recorded for the period since January 2001. Chapter VI, Section Q (Calendar) explains its use.

C. CORRECTING MISTAKES

It is very important that you record all answers neatly. For precoded responses, be sure that you circle the code for the correct response carefully. For open-ended responses, the reply should be written legibly so that it can be easily read.

If you make a mistake in entering a respondent’s answer or she/he changes her/his reply, be sure that you cross out the incorrect response and enter the right answer. Do not erase an answer. Just put two lines through the incorrect response.

Here is how to correct a mistake:

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
106	Have you ever attended school?	YES..... 1 NO..... 2	1 → 109

Remember that if you are not careful to cross out mistakes neatly, it may not be possible to determine the correct answer when the data are entered later into the computer.

D. FOLLOWING INSTRUCTIONS

You should pay particular attention to the skip and filter instructions that appear throughout the questionnaire.

1. Skip instructions

It is very important not to ask a respondent any questions that are not relevant to her/his situation. For example, a woman who is not pregnant should not be asked for how many months she has been pregnant. In cases where a particular response makes subsequent questions irrelevant, an instruction is written in the questionnaire directing you to skip to the next appropriate question. It is important that you carefully follow skip instructions.

Example: Notice that if you circled either Code ‘2’ or ‘8’, you would skip to Question 711. Question 710 about the method of contraception the woman would prefer to use is only asked of women who responded ‘YES’ to Question 711.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
711	Do you think you will use a contraceptive method to delay or avoid pregnancy at any time in the future?	YES.....1 NO.....2 DO'NT KNOW.....8	1 → 713

2. Filters

To ensure the proper flow of the questionnaire, you will sometimes be directed to check a respondent’s answer to an earlier question, indicate what the response was by marking a box, and then follow various skip instructions. Questions of this type are called “filters”; they are used

V. HOUSEHOLD QUESTIONNAIRE

The purpose of the Household Questionnaire is to provide information on general characteristics of the population and their households. You will use the Household Schedule part of this questionnaire to identify women who are eligible to be interviewed with the Woman's Questionnaire and men who are eligible to be interviewed with the Man's Questionnaire (if the household is in the sample for men's interviews).

A. IDENTIFICATION OF HOUSEHOLD ON THE COVER PAGE

Before you go to a selected household, fill in the identification information in the box at the top of the cover page. The identification information is obtained from the sample household listing and will be given to you by your supervisor.

Fill in the boxes with the appropriate codes. If a solid line is provided, write down the relevant information in words. Fill in the name of the District, Tehsil/Taluk, and City/Town/Village in which you are working on the solid lines. Record the state name and number and the number assigned to the cluster (PSU) in which you are working. Fill out the household number in the boxes to the right of HOUSEHOLD NUMBER.

Record whether this place is in a mega city, large city, small city, large town, small town, or the countryside (rural) by placing a '1', '2', '3', '4', '5', or '6' in the single box on the right. A MEGA CITY is one which has a population of five million or more people, a LARGE CITY is one which has a population of at least one million people, but less than five million people. A city having a population of one lakh or more but less than one million is classified as a SMALL CITY. A LARGE TOWN has a population of at least 50,000 but less than one lakh. SMALL TOWNS are urban areas that have a population of less than 50,000. All other areas are to be coded as RURAL areas. Your supervisor will write the correct code for the cluster you are in on the top right box of the Interviewer's Assignment Sheet. Also write the name and address of the head of the household which you are to interview on the lines provided.

Then fill out the information on whether the household has been selected for: the men's interview and HIV testing.

You will fill in the rest of the cover page after you have conducted the interview. See the instructions in Section E (RETURN TO COVER PAGE) below.

B. COMPLETING THE HOUSEHOLD QUESTIONNAIRE

To complete the Household Questionnaire, you will need to find a suitable respondent. Any adult member of the household who is capable of providing information needed to fill in the Household Questionnaire can serve as the respondent. If an adult is not available, do **not** interview a young child; instead, go on to the next household, and call back at the first household later.

Generally you will ask a single individual in the household for the information you will need to complete the Household Questionnaire. However, as appropriate, you may need to consult other members of the household for specific information.

The informed consent statement at the beginning of the questionnaire has to be read exactly as it is written and all instructions followed. The household interview cannot be started until you have obtained the consent of a household respondent.

Household Schedule (Qs. 1-29)

Start by reading the introductory sentence at the top of the schedule to inform the respondent that you are interested in getting information about all usual household members and any other persons who might be staying with the household. Then immediately continue with the question in Column (2).

Column (1): LINE NUMBER

In Column (1), each row of the household schedule is assigned a unique number. This number is referred to as the 'Line Number'. It is used to identify the person listed in that row and to link all information collected later in the Household Questionnaire and in the individual interview (if the individual is eligible) to that individual.

Column (2): USUAL RESIDENTS AND VISITORS

The first step in completing the household schedule is to request a list of all persons who usually live in the household and any visitors. To get a correct listing, you will have to know what we mean by a member of the household and what we mean by a visitor:

- Member of the household. A household may be one person or a group of persons who usually live and eat together. This is not the same as a family. A family includes only people who are related, but a household includes any people who live together, whether or not they are related. For example, three unrelated men who live and cook meals together would not be considered one family, but they would be considered to be members of the same household.
- Visitor. A visitor is someone who is not a usual member of the household but who stayed in the household the night before the day you are conducting the interview. If an individual stayed in the household the previous night, he or she should be listed on the Household Schedule.

Sometimes, it is not easy to know whom to include in the household and whom to leave out. Here are some examples:

- A woman lists her husband as head of the household, but he lives somewhere else. If he does not usually live in the household you are interviewing, and he did not sleep there the previous night, he should not be included in the listing.
- Sometimes people eat in one household and sleep in another. Consider the person to be a member of the household where he or she sleeps.
- A person living alone is a household.
- A servant is a member of the household if he or she usually lives in the household.

Anyone included in the household listing either has to be a usual resident of that household—Column (5) is YES—or has to have spent the previous night in the household—Column (6) is YES.

As your respondent lists the names, write them down, one in each row in Column (2) of the table,

beginning with the household head. The person who is identified as the head of the household has to be someone who usually lives in the household. This person may be acknowledged as the head on the basis of age (older), sex (generally, but not necessarily male), economic status (main provider), or some other reason. It is up to the respondent to define who

heads the household (as long as the designated household head is a usual member of the household). There generally should not be a problem with this. If the person responding to the household interview is not the head of household, then you may record this person on any line except the first line.

If the last name is the same for several people, you can use abbreviations or ditto marks:

Example: 01 Arun Mehta
02 Madhu "
03 Raja "

After entering a name, the relationship of that person to the head of the household and that person's sex should be recorded in Columns (3) and (4) **before** going on to record the name of the next person.

Column (3): RELATIONSHIP

Record how the person listed is related to the head of the household. Use the codes at the bottom of the page. **If the respondent is not the head of the household, make sure that you record the relationship of each person to the household head, not the relationship to the respondent.**

Example 1: If the respondent is the wife of the head of the household and she says that Raja is her brother, then Raja should be coded as '09', BROTHER-IN-LAW OR SISTER-IN-LAW, not BROTHER OR SISTER, because Raja is a brother-in-law of the head of the household.

Example 2: If the head of the household is married to a woman who has a child from a previous marriage, that child's relationship to the head of the household should be coded as '12' (ADOPTED/FOSTER/STEPCHILD).

Column (4): SEX

Always confirm the sex of a person before recording it in Column (4) since there are many names that may be given to either a male or female.

When you have written all the names, you want to be certain you have included everyone who should be listed before continuing with the rest of the questionnaire. To do this, ask each of the questions (4A) in the box at the end of the Household Schedule. If the answer to any is YES, add the name(s) of that person/those persons to the list.

After completing Columns (2) through (4) for all household residents and visitors, start with the person listed on Line 01 and move **across** the page, asking each appropriate question in Columns (5) through (29). When you have completed the information for the person on Line 01, move to the person listed on Line 02, etc.

Columns (5) and (6): RESIDENCE

In Column (5), record information on the person's usual residence. A usual member of the household may or may not have stayed in the household during the previous night. However, for a visitor to be listed, he or she needs to have stayed in the household the night before the interview.

If after asking these residence questions you learn that the person does not usually live in the household (Column (5) is NO) and did not stay there the night before (Column 6 is also NO) you

will have to delete this person from the listing because she/he is neither a usual household member nor a visitor. After deleting the person, you must renumber the line numbers assigned to all of the persons listed in the household schedule after that person. WHEN RENUMBERING, REMEMBER TO DO THIS IN THE FIRST COLUMN OF ALL OF THE PAGES OF THE HOUSEHOLD SCHEDULE WHERE THE LINE NUMBER IS GIVEN, AS WELL AS COLUMNS (9), (10), AND (11).

Example: You had listed Naina in Line Number 04 and then learned that she does not usually live in the household and she did not stay there the night before. You would draw a line through Row 04, canceling Naina from the listing. Then you would have to **renumber** the subsequent Line Numbers in Column (1). The same change should be made in the Line Numbers in Columns (12A) and (22A). Whenever you make a correction to the Line Numbers, you should also make corrections to the Line Numbers in Columns (9), (10) and (11).

Column (7): AGE

If you have difficulty obtaining the ages of household members, use the methods described for Qs. 104 and 105 in the Woman's Questionnaire to probe for the correct age. You are to obtain each person's age in completed years, that is, the age at the time of the last birthday. Any ages that are close to the eligibility cut off ages should be carefully probed specially ages 5, 6, and 7 in the case of children, 14, 15, 16 for women and men, 48, 49, 50 for women, and 54, 55, and 56 for men.

Column (8): CURRENT MARITAL STATUS

The question on current marital status is to be asked for people who are 10 years or older. For anyone less than 10 years old, simply leave Column (8) blank.

Record in the box given, the current marital status of the person using the codes given at the bottom of the page. Enter:

- '1' if the person is married irrespective of whether the spouse lives in the same household.
- '2' if the person is married but *gauna* has not been performed.
- '3' if the person was married but his/her spouse is dead.
- '4' if the person is married, and his/her spouse is alive, but they are separated and do not live together as husband and wife.
- '5' if the person is married, but has been deserted by her/his spouse.
- '6' if the person was married, but has legally obtained a divorce from his/her spouse.
- '7' if the person has never been married.
- '8' if the respondent does not know the person's marital status at all.

In general, record the marital status for each person as reported by the respondent. Probe only if there is some doubt. For example, if you are told that a 13-year-old girl is married, you should ask: Has *gauna* been performed?

Columns (9) through (11): ELIGIBILITY

Look at Columns (4) and (7) and circle the Line Number in Column (9) for all women who are between 15 and 49 years of age (including those who are age 15 and 49). These women are "eligible" women, and they qualify for an interview using the Woman's Questionnaire. Remember, the person may be a usual resident of the household or a visitor.

Then look again at Columns (4) and (7) and circle the Line Number in Column (10) for all men who are between 15 and 54 years of age (including those who are age 15 and 54). These

individuals are “eligible” men, and they qualify for an interview using the Man’s Questionnaire. Remember, the person may be a usual resident of the household or a visitor.

Next, to identify eligible children, look at Column (7) for children (male or female) who are under six years of age, and circle the Line Number in Column (11).

Column (12): BIRTH REGISTRATION

In this question we are seeking information about whether children age 0-4 years have a birth certificate or birth registration. This is because prompt registration at birth is seen as an essential means of protecting a child's right to identity, as well as respect for other child rights. The lack of a birth certificate may prevent a child from receiving health care, nutritional supplements and social assistance, and from being enrolled in school. Later in childhood, identity documents help protect children against early marriage, child labour, premature enlistment in the armed forces or, if accused of a crime, prosecution as an adult.

We begin by asking if the child has a birth certificate (a baptismal certificate or other religious document if not issued by a government authority cannot be considered a birth certificate). If the respondent says the child does not have a birth certificate, then ask if the child was registered with the municipal or local authorities. In Column (12), circle ‘1’ if the child has a birth certificate; circle ‘2’ if the child does not have a birth certificate but has been registered with the civil authorities; circle ‘3’ if the child does not have a birth certificate and has not been registered; and circle ‘8’ if the respondent does not know.

Columns (13) - (14): SURVIVORSHIP AND CO-RESIDENCE OF BIOLOGICAL PARENTS

For all children who are younger than 18 years old (ages 0-17 years), we want to know whether either of their own (natural) parents is alive and if the living parents are listed in the Household Schedule. This information will be used to measure the prevalence of orphanhood and child fostering in the population. For everyone age 18 years and older, Columns (13) and (14) will be left blank.

First, ask whether the child’s natural mother lives in the household. By “natural” we mean the biological mother, that is, the woman who gave birth to the child. In many cultures, people consider other people’s children whom they are raising as their own, especially children of their husband or sisters, etc. So you should be certain that the respondent understands that you are asking about the child’s biological mother.

If the child’s biological mother is living in the household or if she stayed in the household the night before the interview, then she will have been listed in the household schedule. Check her Line Number and record it in the boxes provided.

If the child’s biological mother is not living in the household, ask the whether she is alive. If alive and living elsewhere (that is she is not a usual member of this household or a visitor), record ‘00’ in the boxes. If the child’s mother is dead, record ‘95’ in the boxes.

In Column (14), you will take the same approach for the child’s biological father as you did in Column (13) for the child’s biological mother.

Columns (15) through (22): LITERACY AND EDUCATION

Questions on literacy and education are not to be asked for people who are younger than five years old. For anyone under five years old, simply leave Columns (15) through (22) blank. Also note that Columns (18) through (22) are to be asked only of those age 5-18 years.

For everyone age 5 or older, ask the question in Column (15). Circle '1' for persons who can read and write, and '2' for those who cannot read and write.

Then ask the question in Column (16). Circle '1' for persons who have ever been to school and proceed to Column (17). Circle '2' for those who never went to school and go to Column (23). The term "school" means formal schooling, which includes primary, secondary, and post-secondary schooling, and any other intermediate levels of schooling in the formal school system. This definition of school does not include Bible school or Koranic school or short courses like typing or sewing. However, it does include technical or vocational training beyond the primary school level, such as long-term courses in mechanics or secretarial work.

If the person has never attended school, you will leave Columns (17) through (22) blank. If the person has attended school, you will record the highest standard/year of school the person has completed successfully in the boxes in Column (19). The codes at the bottom tell you what to do in special circumstances. In Column (17), if the respondent tells you that Kumari went to school but did not complete standard 1, enter '00'. If the respondent does not know the relevant standard in Columns (17), (19) or (21), enter '98'.

Example: A child who is currently in the third year of primary school would have completed STANDARD 02 (she has not yet completed the third year).

Preschool attendance is not considered as attending school.

Example: A child is currently in Upper KG and was in Lower KG the previous year. In this case circle code '2' in Column 16 and follow the skip pattern.

Example: A child is currently in standard '01' and was in Upper KG the previous school year. In this case, Column 16 will be coded '1', '00' will be entered in Column '17', Column 18 will be coded '1', '01' will be entered in Column 19 and Column 20 will be coded '2'.

Note also that being enrolled for a degree through a correspondence course will be coded as attending school/college.

For persons who have completed high school or have higher education, you need to enter the total number of years of education completed. In NFHS-3 it is assumed that it takes 10 years to complete matriculation/high school and 12 years to complete higher secondary. Thus, for those who are educated beyond the higher secondary level, add the additional number of years of education they have had to the number 12. Since there is great variation throughout the country in the number of years it takes to complete different higher education degrees, illustrative guidelines are provided below on the number of years that should be entered for some of the more common degrees. The guiding principle that should be used is to enter the minimum number of years needed to complete the degree. Also, if a person has done the same degree twice (two M.A.s for example) then just count the MA one time. Using this standardized procedure will avoid extensive probing.

Bachelor's degree	15 years (12+3)
Master's degree	17 years (12+3+2)
Engineering	16 years (12+4)
MBBS	17 years (12+5)
Polytechnic	13 years (10+3)
ITI	11 years (10+1)
Ph.D	20 years (12+3+2+3)

Some examples are:

"Sita is in the final year of BA." Enter '14' (12+2) in the boxes.

"Rajesh is studying in the second year of MBA after Engineering. The total completed years of education are calculated as 16 for Engineering + 1 year (first year of MBA, which he has completed) = 17.

For people age 5-18 who have ever attended school, ask the question in Column (18). If a person has not attended school at all during the 2005-2006 school year, circle '2' and skip to Column (20), leaving Column (19) blank.

If the person has been in school at any time during the 2005-2006 school year, even if he or she is not currently attending school, ask the question in Column (19). Record the standard/year the person is/was attending.

For people age 5-18 who have ever been to school, also ask whether the person attended school during the 2004-2005 school year (Column (20)). If the person went to school at all during the previous school year, circle '1' even if the person did not attend school for the entire school year.

If the person attended school at any time during the 2004-2005 school year, ask the question in Column (21) about the standard/year the person attended and continue with Column (22) only if Q. 18 is NO; otherwise skip to Column (23). If the person did not attend school during the 2004-2005 school year, leave Column (21) blank and continue with Column (22) only if Q. 18 is NO; otherwise skip to Column (23).

You will ask the question in Column (22) only if the answer to Column (18) is "NO." Ask for the main reason the person is not attending school and record the answer using the codes at the bottom of the page.

Columns (23) - (29): CHILD LABOUR

Columns (23) through (29) are to be asked only of those age 5-14 years. This set of questions is trying to determine the type and amount of work children do. Children could be employed by someone who is not a member of the household (Column (23)), they could be doing work around the house like washing dishes, cleaning, looking after children, fetching water or firewood (Column (26)) or they could be working on a family farm or in a family business, where essentially the family is the 'employer', or selling goods in the street (Column (28)). In these questions, "pay" refers to any compensation for the work, including cash or goods or services provided to the child or his/her family. "The past week" refers to the seven days preceding the interview day. In questions with 'since last (DAY OF THE WEEK)', DAY OF THE WEEK refers to the day that is seven days ago. Example: If you are conducting the interview on a Wednesday, substitute the same day of the week and say 'since last Wednesday.'

In Column (23) if the answer is YES, ask if the work was done for PAY. Circle '1' if any of the work was done for pay. Circle '2' if none of the work was done for pay. If '1' or '2' is circled, continue to the next question. If no work (paid or unpaid) was done by that child in the past week, circle '3' and skip to Column (25).

In Column (24), record the estimated number of hours the child spent doing this type of work in the past seven days and skip to Column (26). If the child has more than one such job, include the total hours spent doing such work in all jobs. If the total number of hours is 95 or more, record '95.'

For children who have not worked for someone who is not a member of the household in the past week, ask whether they have done any such work in the past year (Column (25)) and follow the instructions for Column (23).

Columns (26) and (27) get similar information for household chores, i.e., whether children are doing household chores and how much time they spend doing these chores. In general this work is not for pay and is done as part of the household responsibilities. Again, 'past week' refers to the seven days preceding the interview day.

In Column (27), insert the estimated number of hours the child spent doing household chores in the past seven days. If the total number of hours is 95 or more, record '95.' For DAY OF THE WEEK specify the name of the current day of the week.

Finally, in Columns (28) and (29), we ask about 'other family work.' Other family work means any work done other than household chores/housekeeping to help with family income generation or subsistence production. This may include raising livestock belonging to the household or working in a family business enterprise. Circle '1' if YES, and continue to the next question. If NO, circle '2' and go to Column (5) on the next line.

In Column (29), enter the estimated number of hours doing other family work. Again, make sure the respondent understands what you mean by "since last (DAY OF THE WEEK)" – specify the name of the current day of the week, just as you did earlier. If the total number of hours is 95 or more, record '95'.

CONTINUATION SHEET

If you interview a household that has more than 15 members, mark the box at the end of the list of household members, take a fresh Household Questionnaire, fill in all the information on the cover page, and write "CONTINUATION" on the top. Then on the second Household Questionnaire, change Line Number 01 to 16 and if necessary, change line 02 to 17 and so on in Columns (1), (9) through (11), 12A, and 22A. Then write the information for these household members. Return to the first Household Questionnaire to complete the interview.

Qs. 30-31A: TUBERCULOSIS

After asking the questions in the Household Schedule, you will ask about tuberculosis. Question 30 asks whether any *usual resident* in the household suffers from tuberculosis. This does not include visitors who are not usual residents in the household. Tuberculosis (TB) is an infectious disease which affects the lungs and other tissues of the body. Tuberculosis of the lungs, the most commonly known form of TB, is characterized by the coughing up of mucus and sputum, fever, weight loss, and chest pain. If any household member suffers from TB, circle '1' for YES, and continue to Q. 31.

In Q. 31, you will ask about who in the household suffers from TB, and record the line numbers of only those who suffer from TB. Probe to be sure that the respondent has listed all those suffering from TB. Once you have recorded all those with TB enter '95' in the very next set of boxes to indicate that there are no more cases of TB. The rest of the boxes will remain empty. For example, if there are two usual residents of the household with TB, enter the line numbers for these persons in the first two sets of boxes and '95' in the third set and leave the fourth set empty. After you have completed the listing of those with TB, ask Q. 31A about medical treatment for the TB. The exact treatment does not matter, but the treatment should have been medical in nature. Remember that you only need to ask this question for household members with TB.

Q. 32: HOUSEHOLD DRINKING WATER

The purpose of this question is to assess the cleanliness of the household's drinking water by asking about the household's main source of water. If drinking water is obtained from several sources, probe to determine the source from which the household obtains the majority of its drinking water. If the source varies by season, record the main source used at the time of

interview. Remember we are interested in the source of the water. If for example, water from a tanker truck is stored in an overhead tank and then is piped into the home and flows through a tap, the source should be coded as “TANKER TRUCK” not “PIPED INTO DWELLING”. The codes under PIPED WATER should be used only where the source of water is a public or private water distribution system. The table below gives definitions of all of the response codes in Qs. 32 and 33.

Definitions of Water Source Codes for Qs. 32 and 33	
<i>Response Categories</i>	<i>Definition</i>
Piped water into dwelling	Pipe connected with in-house plumbing to one or more taps, e.g. in the kitchen and bathroom. Sometimes called a house connection. In-house pipes connected to a public or private water distribution system.
Piped water to yard/plot	Pipe connected to a tap outside the house in the yard or plot (and the water is coming from a public or private water distribution system). Sometimes called a yard connection.
Public tap/standpipe	Public water point from which community members may collect water (and the water is coming from a public or private water distribution system). A standpipe may also be known as a public fountain or public tap. Public standpipes can have one or more taps and are often made of brickwork, masonry or concrete.
Tubewell or borehole	A deep hole that has been driven, bored or drilled with the purpose of reaching ground water supplies. Water is delivered from a tubewell or borehole through a pump which may be human, animal, wind, electric, diesel or solar-powered.
Protected dug well	A dug well that is (1) protected from runoff water through a well lining or casing that is raised above ground level and a platform that diverts spilled water away from the well and (2) covered so that bird droppings and animals cannot fall down the hole. Both conditions must be observed for a dug well to be considered as protected.
Unprotected dug well	A dug well which is 1) unprotected from runoff water; 2) unprotected from bird droppings and animals; or (3) both.
Protected spring	A spring protected from runoff, bird droppings, and animals by a “spring box” which is typically constructed of brick, masonry, or concrete and is built around the spring so that water flows directly out of the box into a pipe without being exposed to outside pollution.
Unprotected spring	A spring that is subject to runoff and/ or bird droppings or animals. Unprotected springs typically do not have a “spring box”.
Rainwater	Rain that is collected or harvested from surfaces by roof or ground catchment and stored in a container, tank or cistern.
Tanker truck	Water is obtained from a provider who uses a truck to transport water into the community. Typically the provider sells the water to households.
Cart with small tank	Water is obtained from a provider who transports water into a community using a cart and then sells the water. The means for pulling the cart may be motorized or nonmotorized (e.g., a bullock).

Surface water	Water located above ground and includes rivers, dams, lakes, ponds, streams, canals, and irrigation channels
Bottled water	Water that is bottled and sold to the household in bottles.

Q. 33: MAIN SOURCE OF WATER FOR OTHER PURPOSES

Only households that use bottled water as a source of drinking water are asked for the main source of water for cooking and hand washing to assess the cleanliness of the source of water to which the household has general access.

Q. 34: LOCATION OF WATER SOURCE

If the source of water is other than water piped into the dwelling or compound or rainwater, probe to determine the location of the source, whether the source is located within the dwelling or compound or elsewhere.

Q. 35: TIME TO GET WATER

This question is not asked if the respondent’s source of drinking water (or water for handwashing and cooking if the household uses bottled water for drinking) is piped and located within the household compound or if the household relies on rainwater.

Include the time it takes to get to the source, wait to get water (if necessary), and get back to the house. Record the time it takes to get water by whatever means of transportation the person generally uses, whether the person walks or rides a bicycle or motor vehicle.

Convert answers given in hours to minutes. Put zeroes in front of the response if necessary; for example, “30 minutes” would be ‘030,’ and “one hour and a half” would be ‘090.’ If the source of water is on the property, for example a stream that runs through the yard, you would record ON PREMISES.

Q. 36: WHO FETCHES WATER

The purpose of this question is to know which household member(s) usually perform the task of fetching water. Knowing which member of the household usually hauls the water gives us an idea of whether gender and generational disparities exist with respect to water hauling responsibilities. If the respondent answers that there are several members of the household who perform this chore, emphasize that you are interested in the person who usually fetches the water (i.e., most of the time).

Qs. 37-38: TREATMENT OF DRINKING WATER

The purpose of Qs. 37 and 38 is to know whether the household drinking water is treated within the households to make it safer to drink and if so, what type of treatment is used. The type of treatment used at the household level provides an indication of the quality of the drinking water used in the household. If the respondent mentions more than one type of treatment, circle all the answers since this is a multiple-response question.

Definitions of Selected Water Treatment Codes for Q. 38	
<u>Response Categories</u>	<u>Definition</u>

Boil	Boiling or heating of water with fuel
Add bleach/chlorine tablets	Use of free chlorine to treat drinking water. Free chlorine may be in the form of liquid sodium hypochlorite, solid calcium hypochlorite, or bleaching powder
Strain it through a cloth	Pouring water through a cloth which acts as a filter for collecting particulates from the water
Using a water filter (ceramic/sand/composite/etc.)	The water flows through a medium to remove particles and at least some microbes from the water. Media used in filtering systems may include ceramic, sand and composite.
Let it stand and settle	Holding or storing water undisturbed and without mixing long enough for larger particles to settle out or sediment by gravity

Q. 39: TOILET FACILITIES

The purpose of this question is to obtain a measure of the household's access to proper sanitation facilities, since toilet facilities are important for disease control and health improvement.

Below are some definitions for the terms used in the response categories for Q. 39.

Definitions of Toilet Facility Codes in Q. 39	
<i>Response Categories</i>	<i>Definition</i>
Flush/pour flush toilet	A <u>flush</u> toilet uses a cistern or holding tank for flushing water and has a water seal, which is a U-shaped piped, below the seat or squatting pan, that prevents the passage of flies and odors. A <u>pour flush</u> toilet uses a water seal, but unlike a flush toilet, a pour flush toilet uses water poured by hand for flushing (no cistern is used)
- To piped sewer system	A system of sewer pipes (also called sewerage), that is designed to collect human excreta (feces and urine) and wastewater and remove them from the household environment. Sewerage systems consist of facilities for collection, pumping, treating and disposing of human excreta and wastewater
- To septic tank	An excreta collection device consisting of a water-tight settling tank normally located underground, away from the house or toilet
- To pit latrine	A system that flushes excreta to a hole in the ground
- To somewhere else	A system in which the excreta is deposited in or nearby the household environment in a location other than a sewer, septic tank, or pit, e.g., excreta may be flushed to the street, yard/plot, drainage ditch or other location

Pit latrine	Excreta is deposited without flushing directly into a hole in the ground
- ventilated improved pit latrine (VIP)	A latrine ventilated by a pipe extending above the latrine roof. The open end of the vent pipe is covered with gauze mesh or fly-proof netting and the inside of the superstructure is kept dark
- pit latrine with slab	A latrine with a squatting slab, platform or seat firmly supported on all sides which is raised above the surrounding ground level to prevent surface water from entering the pit and is easy to clean
- pit latrine without slab/ open pit	A latrine without a squatting slab, platform or seat. An open pit is a rudimentary hole in the ground where excreta is collected
Twin pit/Composting toilet	A toilet into which excreta and carbon-rich material are combined (vegetable wastes, straw, grass, sawdust, ash) and special conditions are maintained to produce inoffensive compost
Dry toilet	A place that is used for defecation and from which the feces are regularly picked-up by a scavenger (usually found in old cities). Known as <i>kamau paikhana</i> in Hindi.

Qs. 40-41: SHARED TOILET FACILITIES

Q. 40 asks about whether the toilet facilities are shared with one or more other households. In Q. 41, we want to find out how many households use the same facility. Be sure to include the respondent's household in the total. This is an important measure of the level of hygiene in the household. If 10 or more households share the toilet facility, circle code '95'.

Qs. 42 - 43: TREATMENT OF HOUSEHOLD ILLNESSES

The purpose of this question is to find out where the household members usually seek treatment for an illness. The illness could be of any kind requiring treatment. Note that we are not just referring to a headache or discomfort that can easily be resolved by taking a pill already in the house or bought from the pharmacy; we are referring to illness which requires at least some medical consultation and treatment. If the respondent gives more than one answer, ask: "Where do members of your household go most often?" The following acronyms are used in the response categories for this question and many subsequent questions:

UHC = Urban Health Centre
 UHP = Urban Health Post
 UFWC = Urban Family Welfare Centre
 CHC = Community Health Centre
 PHC = Primary Health Centre
 NGO = Non-governmental organization
 TBA = Traditional birth attendant (either trained or untrained)
 ICDS = Integrated Child Development Scheme

Though codes provided here are comprehensive, often the response given by respondents will be such that it will not exactly fit into these categories. Probing will help the interviewer to place it in the exact category. If they go to a health facility of any type, record the type of facility, not the type of health professional they visit at the facility. Also, it is important to find out whether the facility/person is private or governmental.

Ask Q. 43 if the source of health care is not in the public sector. Be sure to probe for all reasons.

Q. 44: RELIGION OF HOUSEHOLD HEAD

The religion of the head of the household is asked in order to study the differentials in health and population across different religious groups. Do not try to guess the religion of the head of the household from his/her name. Many names are common among different religions.

Q. 45: NAME OF CASTE OR TRIBE OF HOUSEHOLD HEAD

This question is asked to all the respondents irrespective of religion. A sizeable proportion of Christians and Muslims and persons of other religions may still have some affiliation, for example, if they were Hindus before converting to another religion. This information will be used as yet another measure of the socioeconomic background of the households.

If the respondent is other than the head of the household, make sure that he/she is giving the caste or tribe of the head of the household and not his/her own. The name of the caste or tribe to which the head of the household belongs as reported by the respondent should be recorded verbatim and the appropriate code circled. If the head of the household is reported as belonging to both a caste and a tribe, record only the tribe's name. If the respondent says that the head of the household does not belong to any caste or tribe, circle '3' for NO CASTE/TRIBE and skip to Q. 47.

Q. 46: SCHEDULED CASTE/TRIBE OR OTHER BACKWARD CLASS OF HOUSEHOLD HEAD

Circle the correct code, according to whether the respondent tells you that the caste/tribe given in Q. 45 is a scheduled caste, a scheduled tribe, or an 'other backward class' (OBC), or that the head of the household does not belong to any of these disadvantaged groups.

Q. 47: HOUSEHOLD ITEMS

The answers to these questions on ownership of certain items will be used as a rough measure of the socioeconomic status of the household. Read out each item and circle the answer given after each item. Do not leave the codes for any item(s) blank. It does not matter who in the household owns the item; only that the item is owned by the household or one of its usual members.

If the respondent reports that a household item such as a radio or TV is broken, try to find out how long it has been broken and whether it will be fixed. If the item appears to be out of use only temporarily, circle '1' for YES. Otherwise, circle '2' for NO.

Q. 48: FUEL FOR COOKING

Information on the *main* type of fuel used for cooking is collected as another measure of the socioeconomic status of the household. The use of some cooking fuels can also have adverse health consequences. Remember that this question asks about fuel for cooking, not fuel for heating or lighting. **Biogas** includes gases produced by fermenting manure in an enclosed pit.

If the household uses more than one fuel for cooking, find out the fuel used most often. If any fuel other than the precoded ones is reported as being the main fuel used for cooking, circle '96' and specify the type of fuel in the space provided.

Q. 49: FOOD COOKED ON A STOVE, A CHULLAH OR AN OPEN FIRE

In this question we want to find out whether the food in the household is cooked on a stove, a

chullah, or an open fire.

Q. 50: WHETHER COOKING IS DONE UNDER A CHIMNEY

There are various ways that the food can be cooked. For example, the open fire may or may not have a chimney above to channel the smoke. The same is true for chullahs and stoves. Therefore, you need to probe for to find out whether the place where the food is cooked has a chimney hood for ventilation. If the stove has a hood, circle code '1' for YES.

Q. 51: PLACE WHERE FOOD IS COOKED

The purpose of this question is to collect information on the location where the household's food is prepared: in the house, in a separate building, or outdoors. This information is important in providing an indicator of the air quality inside and around the dwelling.

Q. 52: SEPARATE ROOM FOR KITCHEN

If the cooking is done in the house, the respondent is asked whether there is a separate room that is used as a kitchen. This question provides additional information on the hygiene and air quality status of the household.

Q. 53: FLOOR MATERIAL

This is to be filled by observation, not asked as a question since you will usually be able to see for yourself what kind of floor the house has. However, do not hesitate to ask if you are not sure.

If there is more than one kind of flooring material, record the main type of material (the material that covers the largest amount of floor space).

Q. 54: ROOF MATERIAL

This question asks about the main material of the roof, not the ceiling. As with the floor material, you may not need to ask the respondent about the main material of the roof since you will usually be able to see for yourself what kind of roof material the house has. However, observing the roof material may not always be easy or you may be able to observe part of the roof, but not the whole roof. Ask the respondent if you are not sure or if you cannot observe the roof properly. If the household lives in an apartment building, look at the roof from a reasonable distance and ask the respondent if necessary. If there is more than one kind of roofing material, record the main type of material (the material that covers the largest amount of roof space).

Q. 55: WALL MATERIAL

This also is not a question but is to be filled by observation. It refers to the external walls of the structure. You will usually be able to see for yourself what kind of material the walls are made of. However, you should ask the respondent if you are not sure. Again, if there is more than one kind of wall material, record the main type of material (the material that accounts for the largest amount of wall space). This question is about the *exterior* walls of the structure, not the *interior* walls.

Q. 56: TYPE OF WINDOWS

Finally, you will need to observe the type of windows the house has. If you cannot observe all the windows in the house or you are not sure about the type, ask the respondent. Make sure to circle either a '1' or a '2' for each item. Do not leave any blank. The windows in the house may vary. If this is the case, record a '1' if any of the windows appear to have the characteristic in

question (e.g., glass or screens). For example, if all the windows in the house have screens and also curtains, you would circle code '1' for ANY WINDOWS, WINDOWS WITH SCREENS, and WINDOWS WITH CURTAINS OR SHUTTERS.

Q. 57: NUMBER OF ROOMS FOR SLEEPING

Simply ask about the number of rooms that the household uses for sleeping. Include all the rooms where persons in the household sleep, even if those rooms are used for other purposes in the daytime (that is, they are not exclusively used for sleeping). If the household members usually sleep outside the house, you would record '00' for the number of rooms used for sleeping.

Q. 58: OWNERSHIP OF HOUSE

Ask whether anyone in the household owns a house – whether it be the house where the interview is taking place or any other house.

Qs. 59 - 61: OWNERSHIP OF AGRICULTURE LAND

Ownership of agriculture land is another important indicator of the socioeconomic status of the household. First ask Q. 59 to find out whether any member of the household owns any land that can be used for agriculture. The land does not have to be near where the household lives. For example, a household living in the middle of a big city may own some agriculture land in a rural area. 'Agricultural land' here includes only land which is being used or can be used for agricultural purposes. Land used for grazing, brick kilns, etc. and other waste or barren land that cannot be cultivated should not be considered as 'agricultural land'. If the household does not own any agricultural land, skip to Q. 62.

If the answer is YES, ask Q. 60. If the response is in terms of acres, the interviewer can record the answer directly in the boxes. The answer should be rounded to the first decimal place. For example, if the measure given is 3.75 acres, enter 003.8 in the boxes provided. If the household owns exactly 3 acres, enter 003.0. If the response is not in acres, write the complete answer in the space provided making sure to specify clearly the local units used (e.g., Bighas or Gunthas). The field editor will later convert the answer into acres and enter the correct number into the boxes provided.

Ask Q. 61 to those who reported that their household owns agricultural land. Only agricultural land which is irrigated by one or more sources of irrigation such as a canal, pond/tank, well, tube well, or river is to be recorded here. Land which depends only on rain for irrigation is not to be included as irrigated land. The size of the land should be recorded in acres. If the respondent is unable to give the size in acres, then write on the line provided after the question the number in local units, but be sure to specify the unit used. The supervisor will convert the measure in local units into acres in all such cases. If none of the land owned by the household is irrigated then enter '9995'.

Q. 62: OWNERSHIP OF LIVESTOCK, HERDS, POULTRY OR OTHER FARM ANIMALS

Information on whether households own any livestock, animal herds, poultry or various other animals is used as an additional indicator of the socioeconomic status of the household. Ask about each type of animal, and circle the appropriate code. The number of animals owned does not matter, only that one or more is owned by the household or a usual member of the household. Do not leave any lines blank.

Q. 63: BANK ACCOUNT

Ask if any member in the household has an account with a bank, a post office, a credit association or other similar organization in which they can deposit and withdraw funds. Record the appropriate answer.

Qs. 64-65: HEALTH SCHEME OR INSURANCE

With these questions we want to know if any usual household member has health insurance coverage of any kind, whether it be through the government (central or state health schemes), through other employers, or individually bought.

Q. 66: BPL CARD

The BPL card is a card given to households below the poverty line. However, this question needs to be asked in all households (even if they look relatively well off) because sometimes households have managed to obtain a BPL card even if they are not below the poverty line.

Q. 67: MOSQUITO NETS

With Q. 67 we want to find out if the household owns any mosquito nets, not whether they actually use the nets for sleeping. Also it does not matter how many the household owns. If the household has even one, then circle code '1' for YES.

Q. 68: TYPE OF SALT

The purpose of Q. 68 is to assess whether the household uses salt for cooking that has been fortified with iodine. Fortified salt prevents iodine deficiency. Iodine is an important micronutrient and a lack of it may lead to an enlarged thyroid gland in the neck known as goiter and other thyroid related health problems.

Ask the respondent for a sample of cooking salt (enough to fill the small plastic cap in the MBI Kit). If the household uses more than one type of salt, make sure that the sample provided is the salt that the household uses for cooking. Spread the salt surface flat in the plastic cap. If you are using a new test kit for the first time, start by opening the seal of the test solution ampule (white cap) and the retest solution (red cap) by making a pin hole in the seal. To test the salt for iodine content, first shake the vial of liquid from the clear ampule and gently squeeze two drops of the liquid on the surface of the salt sample. If the salt is iodized, the wet salt should change colour. If the salt turns a violet/blue colour, match the colour of the wet salt with the color chart in the test kit. Record the result [less than 15, more than 15 ppm (parts per million)] in Q. 68 as appropriate, depending on the closest match and continue with the next question. When matching the colour of the wet salt with the colour on the chart, it is important to make sure you have sufficient light to match the colour accurately. It may be necessary to take the salt sample outdoors if the light indoors is inadequate.

If there is no colour change, you need to do a second test. Shake the vial of liquid in the pink ampule and gently squeeze two drops of the recheck solution on the same spot on the salt. Finally match the colour of the wet salt with the colour on the chart and record the result in the questionnaire.

If the household does not have salt, circle '4' for NO SALT IN HOUSEHOLD. If the household refuses to give salt for testing, circle '6' for SALT NOT TESTED. Record the reason that the salt was not tested.

C. SELECTION OF WOMAN FOR THE HOUSEHOLD RELATIONS SECTION

The Woman's Questionnaire is administered to all eligible women in the household with the

exception of one of its sections, namely the section entitled 'Household Relations.' To select which woman is to receive that section, you will have to randomly select one woman from among all the eligible women.

The selection steps are the following:

Step 1: Look on the top left corner of the cover page of the Household Questionnaire for the last digit of the questionnaire number.

Step 2: In the table, circle the corresponding digit in the first column, which is labeled LAST DIGIT OF THE QUESTIONNAIRE NUMBER. Example: If the Questionnaire Number is 936, circle '6'. If it is 3,010, circle '0'. This is the row that you will work in.

Step 3: Now check the total number of eligible women which you have entered on the cover sheet. Circle the corresponding number in the row at the top of the table below the label TOTAL NUMBER OF ELIGIBLE WOMEN IN THE HOUSEHOLD. Example: If there are two eligible women in the household, circle '2'. If there are more than 8 eligible women in the household, circle '8' in the row at the top of the table.

Step 4: Now follow the row and the column that you have marked. Circle the number in the box where the two meet. Example: If the last digit of the questionnaire was '6' and the number of eligible women in the household is 3, you will be in the box which has '2' in it. Circle the '2'.

Step 5: Now go to Column (9) of the Household Schedule and find the eligible woman corresponding to the number in the box and put a * next to her Line Number at the left of the Household Schedule. Example: This household has 3 eligible women; the first has the Line Number '02', the second has the Line Number '03' and the third has the Line Number '07'. If the number in the box is '2' you are looking for the second woman. This is the woman who has the Line Number '03' in the Household Schedule. Put a * next to this Line Number. This is the woman who will be asked the section on Household Relations.

Step 6: Record the household line number of the selected woman in the two boxes at the bottom of the page where the selection was done (the page with the grid).

The selection procedure should be followed even if there is only one eligible woman in the household.

D. WEIGHT, HEIGHT, ANAEMIA AND HIV MEASUREMENTS

All women ages 15 to 49, children born since January 2001, and if the household has been selected for the Men's Interview, all men ages 15-54, will be weighed and measured. All of these persons (except for children born within the six months before the survey) will also have their blood tested for anaemia. In addition, if the household has been selected for HIV testing, all the women (ages 15-49) and all the men (ages 15-54) will be asked to give drops of blood from a finger stick for HIV testing in the laboratory. The measurement of weight and height (anthropometric measurement), the anaemia testing and blood collection for HIV is a separate operation that will be conducted by the health investigators on the team usually after the household interview and all individual interviews in the household have been completed. In some cases, you may be needed to assist in the height and weight measurement. Hence, Instructions on how to measure the weight and height are given in Appendix A. Don't forget that both usual members as well as visitors who spent last night in the household are eligible for the biomarker measurements.

Even though you are not responsible for conducting the biomarker measurements, you will need to complete Columns (69) through (72C). After you have completed the Household Questionnaire through Q. 67, tested the salt in Q. 68, and finished selecting the respondent for

the Household Relations section, you must complete Columns (69) through (72A) based on the information you have already collected in the Household Schedule. (Columns (72B) and (72C) must be completed after the eligible women have all been interviewed.)

Columns (69) through (72A-C): LINE NUMBERS, NAMES, AGES

In Columns (69) and (70), copy the Line Numbers and names of all women age 15-49 in the top panel from Columns (2) and (9) of the Household Schedule. In the bottom panel, copy the Line Numbers of all children under six years old (that is, age 00, 01, 02, 03, 04, and 05) from Columns (2) and (11) of the Household Schedule. Then check the cover page to see whether the household has been selected for the men's interview. If it has been selected, fill out Columns (69) and (70) in the middle panel for all men age 15-54 from Columns (2) and (10) in the Household Schedule. Note: If the household has been selected for HIV, list no more than three eligible women in the panel for women and/or three eligible men in the panel for men (leave the fourth row empty). If there are more than three eligible women or men in the household, use a continuation questionnaire to accommodate the remaining eligible men and/or women. If the household is not selected for HIV testing, then you can fill in a maximum of four women/men in the relevant panel and use a continuation questionnaire for the fifth and higher eligible person(s).

In Column (71), copy the age of the women, men (as required), and children as recorded in Column (7) of the Household Schedule. In Column (72A), record whether or not each eligible woman and man has never been married. Circle code '1' for YES only if the person has never been married (Column (8) in the Household Schedule is 7).

After you have completed interviews with all eligible women, you will return to this section to fill in Column (72B) for women age 15-49 and Column (72C) for children under six years of age.

The rest of the information on the Household Questionnaire will be completed by one of the Health Investigators on the team.

E. RETURN TO COVER PAGE

After you have finished filling out the Household Questionnaire, go back to the cover page of the Household Questionnaire and complete the following information.

INTERVIEWER VISITS

After you have contacted the household, you will need to write in the result of your visit. The spaces under Columns (2) and (3) are for recording the results of any call backs that you may have to make if you cannot contact the household and complete the interview on your first visit. Remember, you must make at least three different visits to try to obtain an interview with a household.

RESULT CODES

The result of each visit should be recorded on the RESULT line using the RESULT CODES. The result of your final visit to a household should be recorded in two places: on the cover sheet of the Household Questionnaire and in Column (6) of the Interviewer's Assignment Sheet. You will make every attempt to contact and interview the household, but sometimes it may happen that you make three visits to the household (at different times) and are unable to conduct the interview. In this case, you record the result of the third visit. If you make more than three visits, record the result of your last visit in the boxes for FINAL VISIT.

The following are descriptions of the various result codes:

- Code 1 Completed. Enter this code when you have completed the household interview.
- Code 2 No household member at home or no competent respondent at home at time of visit. This code is to be used in cases in which the dwelling is occupied, but no one is at home or if there is only a child or an adult member who is ill, deaf, or mentally incompetent. In this case, enter Code '2' as the result of the visit. Try to find out from a neighbour or from the children when a competent adult will be present and include this information in the visit record.
- Code 3 Entire household absent for extended period of time. This code is to be used only in cases in which no one is at home and the neighbours say that no one will return for several days or weeks. In such cases, enter Code '3' as the result of that visit. Since the neighbours may be mistaken, you should make callbacks to the household to check that no one has returned. In cases in which no one is at home and you cannot find out whether they are gone for a few hours or a few weeks, enter Code '2.'
- Code 4 Postponed. If you contact a household, but for some reason, it is not convenient for them to be interviewed, then schedule a callback interview and enter Code '4' on the cover sheet as a result code for that visit. If there is some extreme circumstance such that the interview is never conducted, you would enter Code '4' for the final result code.
- Code 5 Refused. The impression you make during your initial contacts with members of a household is very important. Be careful to introduce yourself and explain the purpose of the survey. Stress that the interview takes only a short amount of time and that the information will be confidential. If the individual with whom you first talk is unwilling to cooperate, ask to speak with another member of the household, such as the household head. Suggest that you can return at another time if it would be more convenient. If the individual still refuses to cooperate, enter Code '5' and report the problem to your supervisor.
- Code 6 Dwelling vacant or address not a dwelling. In some cases you may find that a structure number assigned to you is unoccupied, that is, it is empty with no furniture and is not being lived in. This is what we call "vacant," and you should enter Code '6.' At other times, you may find that a structure is not a residential unit. It may be a shop, temple, school, workshop, or some other type of facility that is not used as a living area. After making sure that there are no residential units at the back of or above the premises, enter Code '6' as the result for the visit. Be sure to report the situation to your supervisor.
- Code 7 Dwelling destroyed. If the dwelling was burned down or was demolished in some other manner, enter Code '7.'
- Code 8 Dwelling not found. You should make a thorough search, asking people in the area whether they are familiar with the address or the name of the household head. If you are still unable to locate the structure, you should enter Code '8' as the result for the visit to that household and inform your supervisor.
- Code 9 Other. There may be times that you cannot interview a household and the above categories do not describe the reason. Examples of cases that would fit in the 'Other' category would be if the entire cluster is flooded and inaccessible or if the

household is quarantined because of a disease.

FINAL VISIT

After you have paid your last visit to the household, you will fill in the boxes under FINAL VISIT. The date of the final visit is recorded in the DAY, MONTH, and YEAR boxes. For example, the last day in October 2005 would be DAY 31, MONTH 10, YEAR 2005. Write your assigned interviewer number in the boxes labeled INT. NUMBER.

Record the result for the final visit in the RESULT box. Add up the number of visits you made for the household interview and enter the total in the box for TOTAL NUMBER OF VISITS.

TOTAL PERSONS IN HOUSEHOLD, TOTAL ELIGIBLE WOMEN, TOTAL ELIGIBLE MEN, AND LINE NUMBER OF HOUSEHOLD RESPONDENT

After you have completed the household interview, you will record the total number of people listed in the schedule in the boxes labeled TOTAL PERSONS IN HOUSEHOLD. This is the total number of persons listed in the Household Schedule, whether or not they are eligible for individual interviews. You will also record (in the boxes labeled TOTAL ELIGIBLE WOMEN), the total number of women in the household who are eligible for interview with the Woman's Questionnaire from Column (9) of the Household Schedule. If no women are eligible, then write '00'. Then check if the household has been selected for the men's interview. If it has, enter the total number of men who are eligible for interview with the Man's Questionnaire from Column (10) of the Household Schedule in the boxes labeled TOTAL ELIGIBLE MEN. In the boxes labeled LINE NUMBER OF RESPONDENT TO HOUSEHOLD QUESTIONNAIRE, record the Line Number of the person who was your respondent.

BOTTOM OF COVER PAGE

At the bottom of the cover page, the team supervisor will write his/her name and the date. The field editor will also write her name and the date on which she edited the questionnaire. Office editing and data entry will only be done in the main office, and space is provided for the office editor and data entry person to record their names.

PREPARE AN INDIVIDUAL QUESTIONNAIRE FOR EACH ELIGIBLE PERSON

After completing the household interview, allocate a Woman's Questionnaire for each eligible woman identified in the household and, if the household has been selected for the men's interview, allocate a Man's Questionnaire for each eligible man identified in the household. You will fill in the Identification information on the cover sheet of the Woman's and Man's Questionnaires for each eligible respondent identified in the Household Schedule. For example, if after completing the household interview, you have found that there are two women and one man eligible for the individual interviews, you will take two Woman's Questionnaires and one Man's Questionnaire and fill in the Identification block for each of them.

The identification information on the Woman's and Man's Questionnaires is similar to the identification information on the Household Questionnaire. However, you must copy the eligible respondent's Name and Line Number from Columns (1) and (2) of the Household Schedule. If an eligible respondent who you can interview is immediately available, proceed to interview the first respondent.

As the interview of each eligible woman is completed, remember to fill out Columns (72B) and (72C) of the Weight, Height and Biomarker Measurement page (refer to section D above).

After completing the interview with the respondent, you will return the completed Household

Questionnaire to your supervisor with the individual Questionnaire inside. If there is more than one eligible woman in the household, e.g., two women, return two completed Woman's Questionnaires inside the completed Household Questionnaire.

VI. WOMAN'S QUESTIONNAIRE

The Woman's Questionnaire consists of a cover page and the following sections:

Section 1	: Respondent's Background
Section 2	: Reproduction
Section 3A	: Marriage and Cohabitation
Section 3B	: Contraception
Section 3C	: Contacts with Health Personnel
Section 4	: Pregnancy, Delivery, Postnatal Care, and Children's Nutrition
Section 5	: Immunization, Health, and Women's Nutrition
Section 5A	: Utilization of ICDS Services
Section 6	: Sexual Life
Section 7	: Fertility Preferences
Section 8	: Husband's Background and Woman's Work
Section 9	: HIV/AIDS and Other Sexually Transmitted Infections
Section 10	: Household Relations

In addition, certain information is recorded in an event calendar which is found at the back of the Woman's Questionnaire. The questionnaire also includes a page for the field staff to record observations about the interview, the interview process and/or the woman's answers.

A. COVER PAGE

The Woman's Questionnaire also has a cover page, similar to that of the Household Questionnaire, on which is recorded the identification information, interview results, and the mother tongue or native language of the respondent. After the household interviewer has been completed the Household Questionnaire, the identification information section on the cover page of an individual questionnaire must be prepared for each eligible woman and man in the household. This is done by filling in the identification section on the cover page.

A record of each contact or attempted contact with an eligible respondent must be recorded in the area of the cover sheet labeled "Interviewer visits." This section should have your name and a record of your visits to that individual in a separate column for each visit, if there is more than one visit. After the final visit, record the date of the final visit plus your interviewer number and the final result code in the section labeled FINAL VISIT. You will also be entering this information into your Interviewer's Assignment Sheet. Note that the Result Code you enter should pertain to the eligible woman and not to the household. Also, in the code boxes in the section on NATIVE LANGUAGE OF RESPONDENT, you must record the code for the native language of the woman after asking for her mother tongue. If the woman's native language is not listed, fill in '19' in the boxes and write the name of the language on the line next to '19 Other (SPECIFY)'.

B. SECTION 1: RESPONDENT'S BACKGROUND

In the first section of the questionnaire, after obtaining the woman's consent to the interview, we collect some general background information about the respondent.

INFORMED CONSENT

The woman's consent for participation in the survey must be obtained before you can begin the interview. Read the informed consent statement exactly as it is written. This statement explains the purpose of the survey, and mentions the time that the interview typically takes, the confidentiality of the information, and the voluntary nature of the respondent's participation, and then seeks her cooperation. The respondent's questions and concerns should be adequately

addressed. The card with the contact address of the IIPS Director should be given to the respondent in case she requires any additional information.

After reading the statement, **you** (not the respondent) must sign in the space provided to affirm that you have read the statement to the respondent. If she does not agree to be interviewed, circle '2', thank the respondent, and end the interview. Then write '4' (REFUSED) as the result on the cover sheet. If the respondent agrees to be interviewed, circle '1' and begin the interview.

Q. 101: TIME

Record the time of the day you start the woman's interview using the 24-hour system. If the hour or minutes are less than 10, put a zero in the first box

Half past nine in the morning is:	HOUR	0	9
	MINUTES	3	0

Half past four in the afternoon is:	HOUR	1	6
	MINUTES	3	0

Q. 102: LENGTH OF RESIDENCE

This question asks how long the respondent has been living in the place where she is being interviewed, i.e., the current village or neighbourhood where she resides. Here, "living continuously" means without having moved away. For example, if the respondent has been away from home only on visits, these periods should not count as having lived away.

If the respondent has always lived in her current place of residence (that is, she has never lived in any other place), circle '95.' If she is a visitor, circle '96' for VISITOR. If either '95' or '96' is circled, the two code boxes should be left blank.

If the respondent has lived in other places, ask her to count how many years she has been living continuously in the current place of residence (how many years have passed since she moved to this place). Record the answer in completed years. Do not round up. If the answer is "three and one-half years," write '03.' If the answer is less than one year, write '00.'

Q. 103: TYPE OF PRIOR RESIDENCE

Record the respondent's answer about the place of residence just before moving to the current neighbourhood. If the respondent has lived in more than one place, we want to know which type of place was the last one before the current place. That is why we say "just before."

Q. 104: MONTH AND YEAR OF BIRTH

Questions 104 and 105 must be asked independently of the information on the Household Questionnaire. Even if you already asked the respondent her age when you were completing the Household Questionnaire, you must ask again for the date of birth on the Woman's Questionnaire.

If the respondent knows her date of birth, write it in the appropriate boxes for MONTH and YEAR. You will need to convert the month into numbers. For this, January is '01,' February is '02,' March is '03,' and so on. If the respondent does not know the month of birth, circle '98' for DON'T KNOW MONTH and ask for the year of birth. If the respondent knows the year, write it in

the boxes for YEAR.

If the respondent gives you the name of a Hindu or Islamic month, consult the Conversion Tables provided. These Tables guide you on which Hindu/Islamic month corresponds with which of the Gregorian months, as well as which Hindu festival falls in which month. If the respondent gives you the name of a Hindu festival, you will have to convert that into a Gregorian month and record the month of birth. Try under all circumstances to obtain at least the year of birth.

If the respondent is unable to provide this information, ask whether she has any documentation such as an identification card or school or birth certificate that might give her date of birth. Only when it is absolutely impossible to estimate the year of birth should you circle '9998' for DON'T KNOW YEAR.

Q. 105: AGE

This is one of the most important questions in the interview, since almost all analysis of the data depends on the respondent's age.

You must obtain the respondent's age in completed years, that is, her age at her last birthday. You must record the respondent's age in one of the following four ways, depending on the type of information you get from the respondent:

- 1) The respondent **knows** her age.
If the respondent tells you her age, simply write it in the space provided.
- 2) The respondent **does not know** her age, but **year of birth is reported** in Q. 104.
If the respondent does not know her age, but did report a year of birth in Q. 104, then you should compute the age as follows:
 - **Birthday in the current year already celebrated.** If the respondent has had a birthday in the current year, subtract the year of birth from the current year (2005 for an interview conducted in 2005, or 2006 for an interview conducted in 2006).
 - **Birthday in the current year not yet celebrated.** If the woman has not yet had a birthday in the current year, subtract the year of birth from last year (2004 for an interview conducted in 2005, or 2005 for an interview conducted in 2006).
 - **Woman does not know when birthday occurs.** If the respondent does not keep track of the time within a year when her birthday falls, it is sufficient to subtract year of birth from the current year.
- 3) The respondent **does not know** her age, and **year of birth is not reported** in Q. 104.
If the respondent does not know her age and could not report a year of birth, you will have to probe to try to estimate the age. There are several ways to probe for age:
 - a) Ask the respondent the age of her eldest living child and how old she was when that child was born. The addition of these two ages will provide the estimate of the respondent's current age.

EXAMPLE: If a woman says she was 19 years old when her first child was born and that the child is now 12 years old, she is probably 31 years old.
 - b) Ask the respondent for her age at marriage, age at consummation of marriage (age at gauna), and the interval between gauna and first birth and the age of the oldest child.

EXAMPLE: If a woman was married at the age of 12, her gauna took place three years later, her first child was born three years after gauna, and the child is 18 years old now, she must be about 36 years old now [i.e., $15+3+18=36$].

- c) In case a woman does not know her age at marriage or age at consummation of marriage, you can estimate her age at consummation of marriage by relating it to her age at menarche, which is the age at which she first started menstruating. As the age at menarche is a biological event that does not vary much from individual to individual, you can take it as 13 years. Thus, if age at consummation of marriage is not known, but the respondent says that she started living with her husband three years after menarche, the age at consummation of marriage can be estimated as 16 ($13+3=16$). If her eldest child is 24 years old, and she had that child a year after she started living with her husband, her current age is probably 41 ($16+1+24=41$).
 - d) You might be able to relate the age to that of someone else in the household whose age is more reliably known.
 - e) Try to determine how old the respondent was at the time of an important event such as a war, flood, earthquake, change in political regime, etc. and add her age at that time to the number of years that have passed since the event. Examples include: India's war with China (1961), war with Pakistan (1965), war with Pakistan and liberation of Bangladesh (1971), and the assassination of Shrimati Indira Gandhi (1984). In such a case, add the respondent's age at that time to the number of years that have elapsed since the event.
- 4) The respondent **does not know** her age and probing did not help. If probing does not help in determining the respondent's age and the date of birth was not recorded in Q. 104, you will have to estimate her age by using your best judgement. Remember, this is a last resort to be used only when all your efforts at probing have failed.

Remember, you **MUST** fill in an answer to Q. 105.

CONSISTENCY CHECK: DATE OF BIRTH AND AGE

You must now check the consistency of the reported year of birth (Q. 104) and age (Q. 105). The respondent's age plus the year of birth must equal the year in which she last had a birthday.

There are two methods for checking whether the age and year of birth are consistent. These are the arithmetic method and the chart method. You may use either method, but do not perform the check until after you have asked Qs. 104 and 105.

I. Arithmetic method. You will choose the procedure explained in 1a or 1b to do the arithmetic, depending on the type of information you have recorded in Q. 104. Use the margins of the questionnaire to do the necessary arithmetic.

1a. IF BOTH MONTH AND YEAR ARE RECORDED IN Q. 104.

- If the month of birth is before the month of interview (that is, the respondent has already had a birthday this calendar year), then the age plus the year of birth should equal the year of interview (2005 for an interview conducted in 2005, or 2006 for an interview conducted in 2006).
- If the month of birth is after the month of interview (that is, the respondent has not yet had a birthday this calendar year), then the age plus the year of birth should equal the previous year (2004 for an interview conducted in 2005, or

2005 for an interview conducted in 2006).

- If the month of birth is the same as the month of interview, then a sum of either the year of interview or the previous year is acceptable.

If the sum is incorrect, then either the year of birth or the age (or both) are incorrect and must be corrected. If the sum is off by exactly one year, then it is also possible that the month of birth is incorrect and the other information is accurate. In such cases, the age and the month and year of birth all need to be reviewed to see where the error lies.

EXAMPLE(S): A woman that you are interviewing in November 2005 tells you that she was born in January 1960 and is 45 years old. To check the consistency of this information, you would add 1960 to 45. If the information the respondent gave you is consistent, the sum should be 2005, since November comes after January.

If another woman you also interview in November tells you that she was born in December 1973 and she is 31 years old, the sum should equal 2004 since she will not become a full year older until December (November is before December).

1b. IF ONLY YEAR OF BIRTH IS RECORDED IN Q. 104.

Add the year of birth to the respondent's age and accept a sum of either 2004 or 2005.

EXAMPLE: You are conducting the interview in January 2006. The woman says she was born in 1976, but she does not know the month. She may either be 29 years (since $1976+29=2005$) or 30 years (since $1976+30=2006$). If the sum does not equal either 2005 or 2006, probe to find out whether the year of birth or age is incorrect.

2. HOW TO CORRECT INCONSISTENT ANSWERS. If the age plus the year of birth do not add to the current year or the previous year as appropriate, probe to get consistent information.

EXAMPLE(S): If the sum equals 2003 and it should be 2004, then you need to add 1 to either the age or the year of birth after checking with the respondent to see which one is wrong.

If the sum adds to 2007 and it should be 2005, you will need to subtract 2 from either the age or the year of birth or else subtract 1 from both the age and the year of birth depending on where the inconsistency is. It is important to understand that either the age or year of birth or both may be incorrect.

II. Chart method. Use the Age/Birth-Date Consistency Chart (Figure 2A for interviews conducted in 2005 and Figure 2B for interviews conducted in 2006) to check consistency. You will choose the procedure explained in 1a or 1b, depending on the type of information you have recorded in Q. 104.

1a. IF BOTH MONTH AND YEAR ARE RECORDED IN Q. 104. Enter the appropriate chart at the age you recorded in Q. 105. If the month of birth is before the month of interview (the respondent has already had a birthday this year), use the right hand column to see what year of birth is consistent with that age. If the month of birth is after the month of interview (the respondent has not yet had a birthday this year), use the left hand column to see what year of birth is consistent with that age.

If the year of birth recorded in Q. 104 is not the same as the year of birth in the chart, then Qs. 104 and 105 are inconsistent and you will have to make a correction.

- 1b. IF ONLY YEAR OF BIRTH IS RECORDED IN Q. 104. Enter the chart at the age you recorded in Q. 105. The year of birth listed in either the left or right hand column is consistent with that age.

If the year of birth recorded in Q. 104 is not the same as one of the two years of birth recorded in the chart, then Qs. 104 and 105 are inconsistent and you will have to make a correction.

2. HOW TO CORRECT INCONSISTENT ANSWERS. If the recorded year of birth (Q. 104) does not agree with the year in the chart, you must correct the inconsistency. Do this by further probing and adjusting the age, the birth date, or both. It is important to understand that either or both of the two pieces of information may be incorrect. Do not always assume that an inconsistency means, for instance, that the date of birth was given correctly and that the age is incorrect. It could be that the date or both the age and the date are incorrect.

Finally, before moving on to the next question, verify that the respondent is indeed eligible. If a woman is younger than 15 years or older than 49 years, you have to terminate the interview. Do this tactfully by asking two or three more questions and then thank the respondent for her cooperation; write INELIGIBLE on the cover page of the questionnaire, and correct the age and eligibility information for this respondent in Columns (7) and (9) or (10) in the Household Questionnaire.

Note: The only time you will go back to correct information recorded in the Household Questionnaire will be to correct information that affects the eligibility status of a respondent. When this happens, you have to correct the total number of eligible women reported in two places: on the cover page of the Household Questionnaire and on your Interviewer's Assignment Sheet. Also, you must go back to the table for selection of the woman for the Household Relations Section and redo the selection of the woman who will be eligible to answer the question in the Household Relations Section of the Woman's Questionnaire.

FIGURE 2A. AGE/BIRTH-DATE CONSISTENCY CHART FOR INTERVIEWS IN 2006

Current Age	Year of Birth	
	Has not had birthday in 2006	Has already had birthday in 2006
	Don't Know	
0	2005	-
1	2004	2005
2	2003	2004
3	2002	2003
4	2001	2002
5	2000	2001
6	1999	2000
7	1998	1999
8	1997	1998
9	1996	1997
10	1995	1996
11	1994	1995
12	1993	1994
13	1992	1993
14	1991	1992
15	1990	1991
16	1989	1990
17	1988	1989
18	1987	1988
19	1986	1987
20	1985	1986
21	1984	1985
22	1983	1984
23	1982	1983
24	1981	1982
25	1980	1981
26	1979	1980
27	1978	1979
28	1977	1978
29	1976	1977

Current Age	Year of Birth	
	Has not had birthday in 2006	Has already had birthday in 2006
	Don't Know	
30	1975	1976
31	1974	1975
32	1973	1974
33	1972	1973
34	1971	1972
35	1970	1971
36	1969	1970
37	1968	1969
38	1967	1968
39	1966	1967
40	1965	1966
41	1964	1965
42	1963	1964
43	1962	1963
44	1961	1962
45	1960	1961
46	1959	1960
47	1958	1959
48	1957	1958
49	1956	1957
50	1955	1956
51	1954	1955
52	1953	1954
53	1952	1953
54	1951	1952
55	1950	1951
56	1949	1950
57	1948	1949
58	1947	1948
59	1946	1947

FIGURE 2B. AGE/BIRTH-DATE CONSISTENCY CHART FOR INTERVIEWS IN 2006

Current Age	Year of Birth	
	Has not had birthday in 2006	Has already had birthday in 2006
	Don't Know	
0	2005	--
1	2004	2005
2	2003	2004
3	2002	2003
4	2001	2002
5	2000	2001
6	1999	2000
7	1998	1999
8	1997	1998
9	1996	1997
10	1995	1996
11	1994	1995
12	1993	1994
13	1992	1993
14	1991	1992
15	1990	1991
16	1989	1990
17	1988	1989
18	1987	1988
19	1986	1987
20	1985	1986
21	1984	1985
22	1983	1984
23	1982	1983
24	1981	1982
25	1980	1981
26	1979	1980
27	1978	1979
28	1977	1978
29	1976	1977

Current Age	Year of Birth	
	Has not had birthday in 2006	Has already had birthday in 2006
	Don't Know	
30	1975	1976
31	1974	1975
32	1973	1974
33	1972	1973
34	1971	1972
35	1970	1971
36	1969	1970
37	1968	1969
38	1967	1968
39	1966	1967
40	1965	1966
41	1964	1965
42	1963	1964
43	1962	1963
44	1961	1962
45	1960	1961
46	1959	1960
47	1958	1959
48	1957	1958
49	1956	1957
50	1955	1956
51	1954	1955
52	1953	1954
53	1952	1953
54	1951	1952
55	1950	1951
56	1949	1950
57	1948	1949
58	1947	1948
59	1946	1947

Q. 106: EVER ATTENDED SCHOOL

The term “school” means formal schooling, which includes primary, secondary, and postsecondary schooling, and any other intermediate levels of schooling in the formal school system. It does not include any preschool such as Kindergarten or Nursery school. This definition of school does not include Bible school or Koranic school or short courses like typing or sewing. However, it does include technical or vocational training beyond the primary-school level, such as long-term courses in mechanics or secretarial work.

Q. 107: HIGHEST STANDARD COMPLETED

For this question, record only the number of the highest standard that the respondent successfully completed.

EXAMPLE: If a woman was attending standard 9 and left school before completing that year, record ‘08.’ Although standard 9 was the highest year she attended, she completed only standard 8.

EXAMPLE: If a woman attended only two weeks of standard 1 in primary school, record ‘00’ for completed years.

If a respondent says simply that she completed primary (or secondary), you must probe to find out the exact number of standards completed. For persons with education beyond the secondary school level, you will need to find out how many years they completed beyond secondary. You will then add the number of years completed beyond the secondary level to the number 12 to calculate the response to Q. 107. Note that in such cases we are using 12 years as the total number of years required to finish higher secondary. There is no need to ask respondents with post-secondary education how many standards they completed in school.

EXAMPLE: If a woman says she stopped after completing two years of B.A., add 2 years to 12 years of school and enter ‘14’ in the boxes.

Q. 108: FILTER FOR EDUCATION LEVEL

This is a filter for you to screen women who have ever attended school according to the highest standard they have completed.

Q. 109: LITERACY

This question is asked only if the woman has not completed standard 6 or higher.

Based on your knowledge of the respondent, choose the language in which the respondent is likely to be able to read if she is literate. Show the first sentence in that language group to the respondent. Give the respondent enough time to read the sentence; do not rush her. If the respondent cannot read the whole sentence, be sure to ask if she can read any part of the sentence to you. Record whether the respondent was not able to read the sentence at all, was able to read only parts of the sentence, or was able to read the whole sentence. If the respondent asks for another language and that language is also included, show the respondent a sentence in the appropriate language. If the required language is not included on the card, circle ‘4’ and specify the language.

It is important to avoid the problem of having other respondents in the household overhear the sentence being read. Subsequent respondents in the household might be able to repeat the sentence when they are interviewed, even if they are unable to read. If there is a second eligible respondent in the household, show the respondent the second sentence on the card. Show the third respondent the third sentence on the card, and the fourth respondent the fourth sentence.

If there are more than five respondents, start again with the first sentence on the card.

Q. 110: LITERACY PROGRAMME

This question asks about participation in any kind of programme (except primary school) that includes learning to read or write as part of the programme. Included might be adult literacy programmes, health and nutrition programmes, micro-enterprise programmes, business cooperatives, etc., as long as learning to read or write is a part of the programme.

Q. 112: NEWSPAPER/MAGAZINE READING

Since this question requires that the respondent should be able to read, it is asked only of the persons who are literate or have completed at least standard 6. The purpose of this question is to find out whether the respondent is exposed to influences outside the home and the local community by means of reading newspapers or magazines. It does not matter what type of articles the respondent reads, what language she reads in, or who buys the newspapers or magazines. It does not matter whether the respondent reads only one of the two (the newspaper or a magazine). The question is simply whether the respondent usually reads some type of print media and how often she does this. Make sure that you read the entire question before accepting the answer.

Q. 113: RADIO LISTENING

If there is any doubt as to whether the respondent listens to the radio almost every day, use your judgment. For example, if the respondent says "I listen almost every day, but during the planting season, I'm away and I don't listen at all," record ALMOST EVERY DAY, since the respondent usually listens almost every day. It does not matter who owns the radio and what programme the respondent listens to.

Q. 114: TELEVISION WATCHING

As with Qs. 112 and 113, the purpose is to get an idea of how much exposure the respondent has to influences outside the place of residence. It does not matter who owns the television or what programme is watched.

Q. 115: MOVIE VIEWING

We are interested in knowing how often the respondent is exposed to movies and cinema outside the home. If the respondent says that she watches movies only on video and never goes to the theatre or cinema hall, circle '2' for NO. We want to know if the respondent usually goes out to see a movie at least once a month. Note that the time reference for this question is one month, whereas it is one week for Qs. 112, 113, and 114.

Q. 116: RELIGION

The respondent's religion is asked in order to study the health, nutrition and fertility differentials across different religious groups. The respondent's religion may not be the same as the religion of the household head. You must enter the respondent's answer. Do not try to guess her religion from her name. Many names are common amongst different religions.

Q. 117: NAME OF CASTE OR TRIBE

This question is asked of all respondents regardless of their religion. A sizeable proportion of Christians and Muslims and persons of other religions may still have some caste/tribe affiliation with the caste/tribe they belonged to before they converted to these religions. This information will be used as yet another measure of the socioeconomic background of the individuals. We are interested in the caste or tribe of the respondent; this can be different from the caste or tribe

of the household head.

If the respondent reports belonging to both a caste and a tribe, record only the tribe's name. If the respondent says that she does not belong to any caste or tribe, circle '3' for NO CASTE/TRIBE and skip to Q. 201.

Q. 118: SCHEDULED CASTE, SCHEDULED TRIBE, OR OBC

If the respondent says that the caste or tribe mentioned in response to Q. 117 is not a Scheduled Caste or Tribe or an Other Backward Class (OBC), circle '4'; otherwise, circle the code corresponding to the respondent's answer.

C. SECTION 2: REPRODUCTION

In this section, information is collected about the births that a woman has had during her life. This is a particularly important section, and you need to be especially careful to obtain all the required information. The questions in this section can be divided into six groups:

- Qs. 201-210: Information about the total number of sons and daughters that a woman has given birth to.
- Qs. 211-221: Specific information about each birth that a woman has had (date of birth, age, sex, etc.)
- Qs. 222-225: Checks on the accurate completion of birth history and a check for whether the respondent has had one or more births in 2001 or later.
- Q. 226: Recording births on the calendar
- Qs. 227-239: Questions about current pregnancy and earlier non-live birth pregnancies
- Qs. 240-242: Questions about menstruation.

GENERAL NOTES ABOUT Qs. 201-221

These questions collect information about all births that the woman has had (no matter who the father is). It is important that you understand which events to include. We want to record all of the respondent's natural births, even if the child no longer stays in the household and even if the child is no longer alive. Children who survived only for a few minutes (and showed signs of life by crying, breathing, or moving) should also be recorded.

It is also important to understand what not to record. You must not record adopted or foster children or children of relatives who may be living in the household. You also should not include children of the husband to whom the respondent did not give birth herself. Finally, you must not record children who were born dead (stillbirths), miscarriages, or abortions.

Q. 201: EVER GIVEN BIRTH

This question serves two purposes: to introduce the section and to learn whether the respondent has ever given birth.

Q. 202: ANY CHILDREN LIVING WITH HER

Read the question slowly. The sons and daughters being considered are those who live with her in her household (which will usually be the household in which the interview is being held,

except for women who are visitors).

Q. 203: NUMBER OF CHILDREN LIVING WITH HER

Fill in the number of sons and daughters who live with the respondent. If she has only sons living with her, write '00' in the boxes for daughters, and vice versa. Remember that we are only interested in the respondent's OWN natural born children and not in foster children, children of her husband by another woman, or children of another relative. Note that it is never correct to record '00' in the boxes for both sons and daughters since women with no children living at home skip Q. 203.

Qs. 204-205: ANY CHILDREN LIVING ELSEWHERE

These questions refer to her sons and daughters who are alive but not living with her. For example, they may be living with a relative, may be staying in a boarding school, may have been given up for adoption, or may be grown-up children who have left home. If she has only sons living elsewhere, write '00' in the boxes in Q. 205 for daughters, and vice versa. Make sure the respondent is not reporting dead children in this question. If she answers NO to Q. 204, skip to Q. 206 and leave Q. 205 blank.

Qs. 206-207: CHILDREN WHO DIED

These questions on children who have died are extremely important and are among the most difficult on which to obtain accurate data. Some respondents may fail to mention children who died very young, so if a woman answers NO, it is important to probe by asking, "Any baby who cried or showed signs of life but survived only a few hours or days?" Some respondents may be reluctant to talk about this subject and may become sad or upset that you are asking such questions. Be sympathetic and tactful in such situations. Say that you know the subject is painful but that the information is important.

Q. 208: TOTAL BIRTHS

Add up the numbers in Qs. 203, 205, and 207 and enter the total in Qs. 208 and on the blank line in Q. 209.

Q. 209: CHECKING TOTAL WITH RESPONDENT

Ask the respondent whether the total is correct. If she says NO, first check your addition, and then go through the list to check with the respondent whether you have obtained the information correctly.

EXAMPLE: Starting with Q. 203, you would ask, "You have two sons and one daughter living with you. Is that correct?" Do the same for Qs. 205 and 207 and then enter the correct sum in Qs. 208 and 209.

Q. 210: FILTER FOR SCREENING WOMEN WITH NO BIRTHS

Check Q. 208 to see if she has had at least one birth. Mark the appropriate box and follow the instructions given. If the respondent has not had any births, proceed to Q. 227.

BIRTH HISTORY TABLE: Qs. 211-221

In this table, we want a complete list of all the births she has had in the order in which they occurred.

Q. 211: INTRODUCTION TO BIRTH HISTORY

Begin the section by informing the respondent that you would like to record the names of all of her children, whether or not they are still alive, from the first to the last. Be sure to include children from previous marriages, if any. The only births we will not include are stillbirths.

If at any time you find that the children are not listed in chronological order, do not cross out the information. Instead, correct the birth order Line Numbers and draw arrows to indicate the correct order.

Q. 212: CHILD'S NAME

Record the name of each child that the respondent mentions on a separate line in Q. 212, beginning with the first born and continuing until the last born (Figure 3). Write the name that distinguishes that child from the others. For example, if there are two children, Ravikumar and Manojkumar, write "Ravi" and "Raj," not "R. Kumar" and "M. ." If the baby never had a name, either because he/she is still very young or because he/she died very young, write "Baby" for the name. Record the names of all the respondent's births in chronological order before going to the next question.

Q. 213: SINGLE OR MULTIPLE BIRTHS

Once you have entered each child's name, ask Q. 213. Ask the respondent whether any of her births were multiple births and record the status of each child. If a child came from a multiple birth, be sure that the twin (or triplet, etc.) is recorded on a separate line. Asking about multiple births is a good way to ensure that the respondent has told you about children from multiple births who did not survive. After you have completed Qs. 212 and 213 for all births, you are ready to proceed with Qs. 214-221 for one child at a time. Note: If the woman's last birth was a multiple birth and one of the births has died, enter the name of the dead child followed by the name of the living child.

Q. 214: CHILD'S SEX

Circle the code for the sex of the child. Although you can often tell the sex from the name, check with the respondent by saying, for example, "and Malati is a girl?" Do not assume the sex of the child from the name.

Q. 215: MONTH AND YEAR OF BIRTH

Write the month and year of birth for the child.

When collecting information on a child's birth date, always look at available documents, such as a birth certificate, vaccination card, horoscope, or school certificate to see whether a date of birth was recorded. Before entering a date from these documents, however, check with the respondent to determine whether she believes the date is accurate. In some cases, the information on the document may be the date when the birth was recorded and not the date when the child was born. If the respondent gives you a year of birth but does not know the month of birth, probe to try to estimate the month.

EXAMPLE: If she says her daughter was born in 1987, but she does not know which month, ask her whether she gave birth in the dry season or the monsoon season, whether she remembers if she was pregnant at Diwali time or at Holi, for example, or during some other significant event/season of the year to try to determine the month of

birth. Convert months to numbers, as before. If you cannot even estimate a month, write '98' for MONTH. Use the Conversion Tables to convert Hindu or Islamic months into Gregorian months, if the month of birth is reported in terms of Hindu or Islamic months.

FIGURE 3. BIRTH HISTORY

211 Now I would like to record the names of all your births, whether still alive or not, starting with the first one you had.
 RECORD NAMES OF ALL THE BIRTHS IN 212. RECORD TWINS AND TRIPLETS ON SEPARATE LINES.
 (IF THERE ARE MORE THAN 12 BIRTHS, USE AN ADDITIONAL QUESTIONNAIRE).

212	213	214	215	216	217	218	219	220	221
What name was given to your (first/next) baby? (NAME)	Were any of these births twins?	Is (NAME) a boy or a girl?	In what month and year was (NAME) born? PROBE: What is his/her birthday?	Is (NAME) still alive?	How old was (NAME) at his/her last birthday? RECORD AGE IN COMPLETED YEARS.	Is (NAME) living with you?	RECORD HOUSE-HOLD LINE NUMBER OF CHILD (RECORD '00' IF CHILD NOT LISTED IN HOUSE-HOLD).	How old was (NAME) when he/she died? IF '1 YR', PROBE: How many months old was (NAME)? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.	Were there any other live births between (NAME OF PREVIOUS BIRTH) and (NAME), including any children who died after birth?
01 Preethi	SING (1) MULT (2)	BOY (1) GIRL (2)	MONTH 06 YEAR 1993	YES (1) NO (2) 220	AGE IN YEARS 12	YES (1) NO (2)	LINE NUMBER 00 (NEXT BIRTH)	DAYS (1) MONTHS (2) YEARS (3)	
02 Arvind	SING (1) MULT (2)	BOY (1) GIRL (2)	MONTH 08 YEAR 1995	YES (1) NO (2) 220	AGE IN YEARS 10	YES (1) NO (2)	LINE NUMBER 04 (GO TO 221)	DAYS (1) MONTHS (2) YEARS (3)	YES (1) NO (2)
03 Baby	SING (1) MULT (2)	BOY (1) GIRL (2)	MONTH 11 YEAR 2000	YES (1) NO (2) 220	AGE IN YEARS 00	YES (1) NO (2)	LINE NUMBER 00 (GO TO 221)	DAYS (1) 17 MONTHS (2) YEARS (3)	YES (1) NO (2)
04 Manju	SING (1) MULT (2)	BOY (1) GIRL (2)	MONTH 01 YEAR 2003	YES (1) NO (2) 220	AGE IN YEARS 03	YES (1) NO (2)	LINE NUMBER 06 (GO TO 221)	DAYS (1) MONTHS (2) YEARS (3)	YES (1) NO (2)
05 Vinod	SING (1) MULT (2)	BOY (1) GIRL (2)	MONTH 01 YEAR 2003	YES (1) NO (2) 220	AGE IN YEARS 03	YES (1) NO (2)	LINE NUMBER 03 (GO TO 221)	DAYS (1) MONTHS (2) YEARS (3)	YES (1) NO (2)

If the respondent does not know the year of birth and there is no birth certificate or other document for the child, see whether the respondent knows a firm birth date for any other child in the household, and relate it to that.

EXAMPLE: If she knows the second child was born in 1985 and the first child was two years old at that time, enter '1983.' You must enter a year for all children, even if it is just your best estimate.

Note: For births in January 2001 or later, be sure to get a month and a year of birth or else filling the calendar will be impossible.

Q. 216: SURVIVAL STATUS

Circle the code for whether the child is still alive or not. If the child is dead, skip to Q. 220. If alive, ask Q. 217. Remember that recalling the death of a child can be traumatic. Your demeanor should be sympathetic but professional.

Q. 217: AGE OF CHILD

The age of all living children should be recorded in completed years.

EXAMPLE: A child who will become three years old next week should be recorded as '02' years today. A child less than one year old will be recorded as age '00' years.

Sometimes, a mother will not know the current age of her child. In this case, you may rephrase the question to, for example, "How many years ago was Ravi born?" You can also use other available information such as relating Ravi's age to the age of a child she does know.

EXAMPLE: The mother may know that her youngest child was born one year ago and that Ravi was two years old at that time, in which case Ravi would be three years old now.

You MUST record an age for all children who are still alive.

CONSISTENCY CHECK: DATE OF BIRTH AND AGE

You are not finished with Q. 217 until you have checked the consistency between Qs. 215 and Q. 217. Check their consistency by using the procedures explained for Qs. 104 and 105 of this manual. You can use either the arithmetic procedure or the Age/Birth-Date Consistency Chart:

Arithmetic procedure. Add the year of birth and the age. If the child has already had a birthday this year (month of birth is prior to month of interview), the sum should equal the year in which you are conducting the interview (2005 if you are conducting the interview in 2005, or 2006 if you are conducting the interview in 2006). If the child has not had a birthday yet this year (month of birth is after month of interview), the sum should be the year before the year of the interview (2004 if you are conducting the interview in 2005, or 2005 if you are conducting the interview in 2006). If the child's month of birth is the same as the month of interview, or if the month of birth is not known, the sum can be either the year of the interview or the previous year.

Age/Birth Date Consistency Chart. Locate the age on the chart for the year in which the interview is conducted. Use Figure 2A if you are conducting the interview in 2005 or Figure 2B if you are conducting the interview in 2006. Check that the birth year is consistent with that age in the chart. Use the right-hand column if the month of birth is before the month of interview and the left-hand column if the month of birth is after the

month of interview. If the month of birth is the same as the month of interview or if the month is not known, the year of birth must be the same as one of the two years of birth recorded in the chart.

Both these procedures are explained in more detail for Qs. 104 and 105.

If year of birth and age are not consistent, probe to get the correct information. Remember when probing, that either or both of the responses—age or birth date—may be erroneous.

Q. 218: CHILD LIVING WITH MOTHER

This question is important in determining the extent to which children live away from their biological mothers. If a child is away at boarding school or lives with other people on a permanent basis, record NO. If the child is away for a short while but usually lives with the mother, record YES.

Q. 219: HOUSEHOLD LINE NUMBER OF LIVING CHILD

Check the household questionnaire. In Q. 219, record the number from Column (1) of the household schedule which corresponds to the line (i.e., the Line number) on which the child's name is recorded. If the child is not living in the household, enter '00' in the boxes. If the child is not listed in the household schedule, but the mother says that the child is in fact a usual resident or a visitor in the household, add the child to the household schedule and record the Line Number in Q. 219.

Be careful in recording the line number, since errors in the recorded Line Numbers cause problems during data processing and can render the information you are collecting unusable.

After recording Q. 219 for the first-born child, you will proceed to Q. 214 for the child born next. After recording Q. 219 for any birth after the first child, you will go to Q. 221.

Finally, note that Qs. 217, 218, and 219 are all skipped, i.e., the coding boxes should be empty, for each child who has died.

Q. 220: AGE AT DEATH

If you are following the skip patterns correctly, you will only be asking this question for children who have died (Q. 216 coded '2').

For children who have died, you must record information about age at death in Q. 220, even if the information is only a best estimate. Age at death information is recorded either in days, months, or years.

- If the child was less than one month old at death, circle '1' and write the answer in DAYS.
- If the child was less than two years old but at least one month old when he or she died, circle '2' and write the answer in MONTHS.
- If the child was two years old or older when he or she died, circle '3' and write the answer in YEARS.

If the instruction in Q. 220 is followed correctly, you should **never** record **'00' months or '00' or '01' years**. If the respondent says that the child was one month old at death then probe to determine whether he/she was less than 30/31 days, exactly 30/31 days or more. If less than 30/31 days then '1' should be circled and the exact number of days should be entered in the

boxes for DAYS. If after probing you find that the death occurred on the 34th day (more than one month) then circle '2' and write '01' MONTHS. If the death did occur on the 30th or 31st day, then also circle '2' and write '01' MONTHS.

Here are some examples of how to record age at death:

RESPONSE

CORRECT ENTRY

"She was 3 years old when she died."

DAYS	1		
MONTHS	2		
YEARS.....	③	0	3

"He was only 6 months old."

DAYS	1		
MONTHS	②	0	6
YEARS.....	3		

"She died when she was 5 days old."

DAYS	①	0	5
MONTHS	2		
YEARS.....	3		

"He was 4 and a half years old."

DAYS	1		
MONTHS	2		
YEARS.....	③	0	4

"He was 2 weeks old when he passed away."

After probing, you learn that the baby was actually 12 days old when he died.

DAYS	①	1	2
MONTHS	2		
YEARS.....	3		

"She died on the same day she was born."

DAYS	①	0	0
MONTHS	2		
YEARS.....	3		

Some points to remember in completing Q. 220:

- **Use completed units.** You should give the answer in completed units, i.e., if she says "four and a half months," record MONTHS '04.'
- **Convert answers given in weeks to days or months.** Note that if the respondent gives you an answer in weeks, you must convert the answer to days or months.

- If the answer is **less than one month** (less than four weeks), probe to find out the **exact age at death in days**. For example, if the answer is “three weeks,” probe for the number of days. If the mother says 19 days, circle code ‘1’ and record DAYS ‘19.’

- If the answer is one or more months (four weeks or more), you would convert the answer to months. An answer of “seven weeks” would be recorded as MONTHS ‘01’ after circling code ‘2’.

- **Probe when the answer is “one year”**. If the respondent answers “one year,” you need to probe to find the exact number of months. We know that if a child died at the age of 10, 11, 12, 13, or 14 months, a woman is likely to round off her answer because she does not know that we need the exact age. This means that she is likely to respond “one year old” even if the child really was 10 months or 13 months old. Therefore, any time a woman responds “one year” to this question, probe by asking, “How many months old was (NAME)?” Record the answer in completed months.

“She died when she was one year old.”

After probing, you may learn that the child was actually 13 months old.

DAYS	1		
MONTHS	②	1	3
YEARS	3		

In responding to this question, a woman may tell you that the baby was not alive when it was born. If she does, probe by saying, “Did the baby cry or show any sign of life when it was born?” If she says the baby was dead when it was born, cross out all entries for this child in the table because it was not a live birth. Make sure to renumber the birth order numbers in Q. 212 when this occurs.

Q. 221: LIVE BIRTHS IN INTERVAL

The purpose of this question is to make sure that we have not missed any of the respondent’s own births. Ask the respondent whether there were any live births that may have occurred between the two already listed births. If the woman tells you there was no other birth, record NO in Q. 221. Then proceed with Q. 214 for the next birth (or go to Q. 222 if you were asking Q. 221 for the last birth).

If the woman tells you that there was another birth, record YES in Q. 221 and add that birth at the end of the birth history. Then draw an arrow showing the birth’s proper location in the history, correct the birth order numbers in Q. 212 for that child and for all subsequent births in the history. As appropriate, also correct the information recorded in Qs. 202-209.

EXAMPLE. Initially a respondent tells you that she has had three births, Shyama, Maya and Ramesh. After recording all of the information for Qs. 212-220 for Maya as appropriate, you ask Q. 221: “Were there any other live births between the birth of Shyama and Maya?” The woman tells you there was a birth after Shyama and before Maya, record YES in Q. 221 and add that birth to the end of the birth history.

Draw an arrow from this last entry to show the location of the birth between Shyama and Maya. Correct the birth order number in Q. 212 for all births following Shyama, i.e., the birth order number for the baby entered at the end of the table should be changed to ‘02’, the birth order number for Maya will become ‘03’ and for Ramesh, ‘04’. You may also have to correct the information in Qs. 202-209 if the woman had not included the baby in her responses to those questions. Finally, before going on to Ramesh, ask Qs. 212-221 for the birth you have just recorded between Shyama and Maya.

Q. 222: PROBING THE INTERVAL SINCE LAST BIRTH

This question is similar to Q. 221 but is specifically designed to probe the time that has passed since the respondent's last birth. For example, if Ramesh is reported to be her last birth, and he was born in 1994, ask, "Have you had any live births since the birth of Ramesh?"

If there was no birth after Ramesh, record NO in Q. 222. If the woman tells you there was a birth since Ramesh, record YES in Q. 222 and add that birth to the end of the birth history. Then ask Qs. 212-221 for that birth. Once there are no more births, change the YES in Q.222 to NO and then go on to Q. 223. You may also have to correct the information in Qs. 202-209.

Q. 223: PROBING THE INTERVAL BEFORE THE FIRST BIRTH

This question is similar to Q. 222 but is specifically designed to probe the time before the birth of the first child.

OTHER POINTS ABOUT THE BIRTH HISTORY TABLE

- 1) Recording of age at death, year of birth, and age of living children. For month of birth in Q. 215, it is permissible to record Code '98' for DON'T KNOW as an answer. However, for year of birth (Q. 215), age of living children (Q. 217), and age at death (Q. 220), you must record an answer, even if it is only your best estimate. It is very important to obtain information for these questions, so you must probe for this information and make your best estimate on the basis of the woman's answers.
- 2) Recording of information on twins (or triplets, etc.). If there are any twins, record the information about each twin on a separate line. If the twins are the respondent's last birth and if one twin is dead, record the living twin last. By doing this, you will be able to talk about the living twin first when you get to Section 4, which may be more comforting for the respondent.
- 3) Recording information for more than 12 births. There are lines for 12 births in the table. If in an exceptional case you find a respondent with more than 12 births, write at the bottom of the table CONTINUED ON A SEPARATE QUESTIONNAIRE. Write the word CONTINUATION and complete the identification information on the cover sheet of the second questionnaire. Then change the number '01' on the birth history in the second questionnaire to a '13' and so on. After you have recorded information in the birth history for the additional birth(s), return to the first questionnaire to complete the interview.
- 4) Correcting of reported sequence of births. If you find that the respondent reports a birth that is not in order of the actual births, draw an arrow indicating the position in the table where it belongs according to the date when it occurred, and correct the Line Numbers printed in Q. 212.
- 5) Checking birth interval. Check the dates of each birth. If any two children are reported born less than seven months apart, e.g., December 1993 and June 1994, probe and correct dates. Either the December birth occurred earlier or the June birth occurred later, or both.

Q. 224: CHECK ON BIRTH TABLE RESPONSES

Q. 224 requires you to review the birth table to make sure that the information is consistent with other earlier responses in the questionnaire and that all information is completely and correctly recorded.

- **CONSISTENCY OF TOTAL BIRTHS.** Check that the number in Q. 208 is the same as the number of births listed in the table. If the number in Q. 208 is the same as the number of births recorded in the birth history table, mark the box labeled NUMBERS ARE SAME and proceed with the rest of Q. 224.

If the number recorded in Q. 208 is not the same as the number of births in the table, mark the box labeled NUMBERS ARE DIFFERENT. Then you must probe to find the cause of the difference and correct it before you continue with the rest of Q. 224. When properly completed, your questionnaire must always have the same number of births in the table as the number recorded in Q. 208. When this is so, mark the box NUMBERS ARE SAME. The rest of Q. 224 is to check that you have filled in the birth history table correctly.

- **FOR EACH BIRTH: YEAR OF BIRTH IS RECORDED.** Look back to Q. 215 to check that every birth has a year of birth recorded. After a year of birth is recorded for every birth, mark the box to the right of the statement.
- **FOR EACH LIVING CHILD: CURRENT AGE IS RECORDED.** Look back to Qs. 216 and 217. For every child that is still alive (Q. 216 is YES), there must be an age recorded in Q. 217. When you have checked that an age is recorded for every living child, mark the box to the right of the statement. (If after checking the table you see that there are no living children, you should still mark the box to show you have gone back to check the table.)
- **FOR EACH DEAD CHILD: AGE AT DEATH IS RECORDED.** Look back to Qs. 216 and 220. For every child that is dead (Q. 216 is NO), there must be an age at death recorded in Q. 220. When you have checked that an age at death is recorded for every dead child, mark the box to the right of the statement. (If after checking the table you see that there are no dead children, you should still mark the box to show you have gone back to check the table.)
- **FOR AGE AT DEATH 12 MONTHS OR ONE YEAR: PROBE TO DETERMINE EXACT NUMBER OF MONTHS.** Look back to Q. 220. If the age at death is reported to be 12 months, probe to determine whether the child died at exactly 12 months, or earlier or later. For example, ask the respondent whether the child had reached his/her first birthday before he/she died. For any dead child that died at an age less than two years (but at least one month), the age at death must be recorded in months. This means that any child with a recorded age at death of YEARS '01' should be probed for the exact number of months. No child should be recorded as dying at one year.

Q. 225: FILTER FOR BIRTHS IN 2001 OR LATER

Look back to Q. 215, count how many births occurred in 2001 or later, and record this number in the box. You must include all births in 2001 or later, even if they later died.

Q. 226: BIRTHS IN THE CALENDAR

Each birth in 2001 or later should be entered in the calendar which is included at the end of the Woman's Questionnaire. Information must be entered in Column (1) of the calendar for each birth that occurred in January 2001 or later. First place a 'B' in the month of birth and write the child's name to the left of the 'B' code. Then ask the number of months the pregnancy lasted,

and record 'P' in each of the preceding months according to the duration of the pregnancy. The number of 'P's must be one less than the number of months that the pregnancy lasted.

More detailed instructions on how to complete the calendar are provided in Section Q below.

Q. 227: CURRENT PREGNANCY STATUS

If the respondent does not know for certain whether or not she is pregnant, circle '8' (UNSURE). If she is not pregnant or if she is unsure, skip to Q. 231.

Q. 228-229: MONTHS OF PREGNANCY

If the woman does not know how many months she has been pregnant, probe to get an estimate of the number of months pregnant. To probe you can ask the woman when she is expecting the baby to be born and work backwards from there. If the respondent says that she is in her fourth month, then enter a 'P' in the month of interview and 3 'P's in the previous three months.

There are three things that you must do for this question:

1) Record the answer in the boxes provided for the question. You must put a zero in the first box if she has been pregnant for nine or fewer months. For example, record '03' for three months of pregnancy if a respondent says that she is currently in her third month of pregnancy.

2) You also must record her pregnancy in Column (1) of the calendar. Write 'P' in the month of interview and for each of the preceding months of pregnancy. The total number of months recorded with 'P' for the current pregnancy will be the same as the number recorded in Q. 228, the number of completed months of pregnancy.

3) Finally, for this pregnancy you must ask the respondent if, at any time during this pregnancy, she has had an ultrasound test (Q. 229). This could have been for any reason. If the respondent says yes, you must record 'Y' in Column (2) in the calendar in the box for the current month. If the respondent says no she did not have an ultrasound test at any time, then record 'N' in Column (2) in the current month.

Q. 230: DESIRED TIMING OF PREGNANCY

Read the entire question to the respondent before accepting an answer, stressing the underlined words. We are asking her about her desire to become pregnant before she knew she was pregnant.

Q. 231: LOST PREGNANCIES

We want to know whether the respondent had any pregnancies that did not result in a live birth, so we ask about each type of lost pregnancy. If a pregnancy ended early and involuntarily, it was a miscarriage. If a woman voluntarily ended a pregnancy, it was an abortion. If a woman gave birth to a child that showed no signs of life, it was a stillbirth.

Q. 232: DATE OF LAST PREGNANCY LOSS

If a respondent has ever lost a pregnancy, write the month and year that the most recent such pregnancy ended. Follow the same procedure for converting months to a number, for example, '08' for August. If the woman cannot remember the date, use probes discussed in Q. 215.

Q. 234: GESTATION LENGTH

This question is asked only of women who lost a pregnancy in January 2001 or later. There are two parts to this question. First record the length of the last lost pregnancy in months in the boxes provided in Q. 234. Then record the pregnancy in Column (1) of the calendar. Enter 'T' in the month that the pregnancy terminated and enter 'P' in each of the remaining months that she was pregnant. The number of months recorded in the questionnaire must equal the total recorded in the calendar. If the woman responds in weeks, you will have to convert the answer to completed months.

EXAMPLES: If she says the pregnancy ended at 14 weeks, record '04' in the boxes for Q. 234 since she was in her fourth month of pregnancy when the birth terminated, and then turn to the calendar. In Column (1), place a 'T' in the month the pregnancy terminated (given in Q. 232) and a 'P' in each of the three preceding months that the woman was pregnant.

If a woman says she had an abortion after ten weeks of pregnancy, you would record '03' in Q. 234 and place a 'T' in the month the pregnancy was terminated and a 'P' in the month preceding two months of termination.

Q. 235: ULTRASOUND TEST DURING LAST NON-LIVE BIRTH PREGNANCY

This is similar to Q. 229, but it refers to the last pregnancy that did not end in a live birth.

Q. 236: OTHER PREGNANCY LOSSES

The respondent has told you about one pregnancy loss in Qs. 231-235. Now ask her whether she has had any other such pregnancies (miscarriages, abortions, or stillbirths) since January 2001.

Q. 237: ENTER LOST PREGNANCIES ON THE CALENDAR

There are two parts to Q. 237:

1) Ask when the other pregnancy/pregnancies ended. Any pregnancy that ended in January 2001 or later and did not result in a live birth should be recorded in the calendar using the same procedure as in Q. 234.

2) Then, for each such pregnancy ask whether, at any time during the pregnancy, she had an ultrasound test. For each yes, record 'Y' in Column (2) in the month that the pregnancy terminated; for each no, record 'N'.

Q. 238: NONLIVE-BIRTH PREGNANCY PRIOR TO 2001

This question refers to pregnancies that ended before 2001 that did not result in a live birth. If the respondent had one nonlive-birth pregnancy that started in November 1999 but terminated in February 2001 circle '2' for NO because the pregnancy did not terminate before January 2001. Of course, this pregnancy should already have been included in the calendar from January to February 2001.

Q. 239: DATE OF TERMINATION OF LAST LOST PREGNANCY

Record the month and year of termination of the last nonlive-birth pregnancy prior to January 2001. Follow the same procedure for converting months to a number, for example, '02' for February. If the woman cannot remember the date, use the probes discussed in Q. 215.

Q. 240: START OF LAST MENSTRUAL PERIOD

The answers to this question will help to determine whether any of the respondents are actually menopausal or infecund because they have not had their periods in a long time. This is important in any study of fertility since menstruation is directly linked to pregnancy.

Record the respondent's answer in the units that she uses.

EXAMPLES: If she says "three weeks ago," circle '2' and record WEEKS AGO '03.'

If she says "Four days ago," circle '1' and record DAYS AGO '04.'

If the respondent appears to be rounding off her answer, probe for an exact answer. For example, if she says "About a week ago," say, "Do you remember which day? Was it before or after the weekend?"

Respondents who have recently had a birth may give an answer such as "I had my last period before this baby was born". Circle '995' in this case.

Qs. 241-242: KNOWLEDGE OF PREGNANCY IN MONTHLY CYCLE

First, ask Q. 241 to see whether the woman thinks there are times during a woman's monthly cycle when she is more likely to become pregnant. If she says there is no time that is more likely than another or she does not know, record her response and skip to Q. 301. If she says there is a time when a woman is more likely to become pregnant, record YES and ask Q. 242. Be sure to read Q. 242 completely before recording the respondent's answer.

D. SECTION 3A: MARRIAGE AND COHABITATION

Q. 301: CURRENT MARITAL STATUS

This question concerns the respondent's current marital status at the time of the interview. If the respondent is currently married, circle code '1' and skip to Q. 303. If the respondent reports that she is married but *gauna* has not yet taken place, circle code '2' and skip to Q. 306. If the respondent is a widow or if she is legally divorced, and she has not remarried, record WIDOWED or DIVORCED, as appropriate, and skip to Q. 308. If the respondent is married, and her husband is alive but she is separated from him, circle code '5' and skip to Q. 308. If she has been deserted, that is, her husband has gone away and left her (she may or may not have any information on where her husband is currently or if he is alive or dead), circle code '6' for DESERTED and skip to Q. 308. If the respondent has never been married, circle code '7' and continue with Q. 302.

Q. 302: FILL IN COLUMN (3) OF CALENDAR

Q. 302 is only for women who have never been married; women in all other marital statuses have been skipped to other questions. For women who have never been married, enter '0' in Column (3) of the calendar in the month of the interview and in each month going back to January 2001. Then skip to Q. 316.

Q. 303: WHERE HUSBAND LIVES

For a woman who is currently married, ask whether she is living with her husband or whether he lives elsewhere. If the woman's husband usually lives with her but is away temporarily, circle '1' LIVING WITH HUSBAND and skip to Q. 305. If the husband usually stays elsewhere, but visits the household occasionally, circle '2' STAYING ELSEWHERE.

Q. 304: DURATION OF SEPARATE LIVING ARRANGEMENTS

If the answer to Q. 303 was STAYING ELSEWHERE, record the duration for which the respondent and her husband have not been living together. If the duration is 11 months or less, circle code '1' and enter the duration in the MONTHS boxes. If the duration is one year or more, circle '2' and enter the duration in completed years in the YEARS boxes. Do not enter **both** MONTHS and YEARS. Note that we are not asking the respondent when her husband last visited her, but for how long they have not been living together. For example, if the respondent says that her husband visited her 6 months ago but has been living in the Gulf for three and a half years, you should circle '2' and enter '03' in the boxes for years. You should not enter '06' in the months boxes.

Q. 305: HUSBAND'S NAME AND LINE NUMBER

Write the name and Line Number of the respondent's husband as recorded in Columns (1) and (2) of the Household Schedule. You must check with the respondent to make sure that you are noting down the correct name. If the husband is not listed in the household schedule, enter '00' in the boxes but still write down his name. If you do not have the Household Questionnaire with you when conducting the woman's interview, write the name of the husband and be sure to fill in the husband's line number from the Household Questionnaire as soon as you can.

Qs. 306-307: NUMBER OF CO-WIVES

In these questions, we are interested in the number of wives *other* than herself that the respondent's husband has. In Q. 307, make sure that you do not include yourself in the number of other wives that your husband has.

Q. 308: MULTIPLE MARRIAGES

If a respondent has been married more than once, circle '2' and skip to Q. 309A. If the woman has been married only once, circle '1' and ask Q. 309.

Q. 309: MONTH AND YEAR OF MARRIAGE

This question is being asked only of women who have been married once. If the respondent knows THE DATE, write it in the appropriate boxes for MONTH and YEAR. You will need to convert the month into numbers. For this, January is '01,' February is '02,' March is '03,' and so on. If she does not know the month of her marriage, circle '98' for DON'T KNOW MONTH and ask her for the year. If she knows the year, write it in the boxes for YEAR. Try under all circumstances to obtain at least the year of marriage.

Q. 309A: MONTH AND YEAR OF FIRST MARRIAGE

This question is being asked only of women who have been married more than once. With this question we want to find out the date of the respondent's first marriage, not the date of any later marriages. Follow the instructions for Q. 309.

Q. 310: AGE AT FIRST MARRIAGE

This question is being asked of women for whom no year of marriage was entered in Q. 309/309A despite your best efforts at probing. It is hoped that even if she is unable to tell you her marriage date, she will be able to give her age at the time of marriage. For a woman who has been married more than once, we want to find out her age at the time of her first marriage, not her age when she got married the second or any other time. As with other age questions, if she doesn't know, probe.

Q. 312: MONTH AND YEAR STARTED LIVING WITH FIRST HUSBAND

Check Q. 308. If the respondent has been married only once, ask her for the month and year that she started living with her husband. If the respondent has been married more than once, ask her for the month and year that she started living with her *first* husband. Note that in this section we ask two different questions, one the date of marriage and the other the date of cohabitation, because for some women, the date of marriage and the date on which they started living with their husband may not be the same due to the practice of *gauna* or for any other reason.

If the respondent knows the date, write it in the appropriate boxes for MONTH and YEAR. If she does not know the month she started living with her (first husband), circle '98' for DON'T KNOW MONTH and ask her for the year. If she knows the year, write it in the boxes for YEAR. Try under all circumstances to obtain at least the year.

Q. 313: AGE FIRST STARTED LIVING WITH HUSBAND

Q. 313 asks how old the respondent was when she first started living with her husband for women who did not know the year in which they started living with their husbands. As with other age questions, if the respondent doesn't know, probe.

Q. 314: FILL IN COLUMN (3) OF CALENDAR

For women who are currently married (and they have been married only once) and for women who are married but *gauna* has not been performed, ask the respondent how long she has been married. For women who are married but *gauna* has not been performed, enter 'N' in Column (3) of the calendar in the month of the interview and in each month going back to the month she was married. Enter '0' in each month before she was married. For all other currently married women who have been married only once, enter 'X' in Column (3) of the calendar in the month of the interview and in each month going back to the month she was married, 'N' in each month she was married but *gauna* was not performed. Enter '0' in each month before she was married.

If the woman has been married more than once, probe to find out when her current marriage started and record the information about her current marriage. Then ask her to tell you when any previous marriages started and ended. Record any previous marriages in Column (3) of the calendar if they occurred during the period since January 2001. The first 'X' should be in the month that she started that marriage and the last 'X' should be in the month just before the marriage terminated. Although she was married for part of the month in which the marriage terminated, record '0' in the month that the marriage terminated (i.e., the last marital status that she had in that month). The total number of 'X's should be equal to the total number of months she has been married since January 2001, irrespective of which marriage it was.

For women who are not currently married, probe to find out when the last marriage started and whether *gauna* was performed when the marriage started. Then find out when that marriage ended. If applicable, ask her to tell you when any previous marriages started and ended. Fill in Column (3) of the calendar accordingly, entering 'N' in all the months that she was married but *gauna* had not been performed, 'X' for the remaining months of her marriage, and '0' for any of the months when she was not married.

For example, if a woman was married in February 2003, *gauna* was performed in March 2004 and her husband died in December 2004, record 'N's' from February 2003 to February 2004, 'X' from March 2004 to November 2004, and '0' from December 2004 until the date of interview or

the date that she remarried, if she remarried.

Qs. 316-317: GENERAL INSTRUCTIONS

These questions on sexual intercourse may be embarrassing for some respondents; therefore, ask them in a matter-of-fact voice and do not make the respondent feel embarrassed by your own interviewing behaviour. A common reaction for people who are embarrassed is to giggle or laugh. If you laugh in return or act as if you are embarrassed too, it will make the respondent think that the questions are not serious. Make sure you maintain a serious attitude.

You must make sure that you have complete privacy, that is there is no one around or listening before asking these questions.

Q. 316: EVER HAD INTERCOURSE

This question is asked only of women who have never been married and women who are married but *gauna* has not been performed. Ask the respondent if she has ever had sexual intercourse. If she has not, skip to Q. 318.

Q. 317: AGE AT FIRST INTERCOURSE

Q. 317 is for women who have been married as well as for women who answer YES to Q. 316. For women who have been married, read the introduction which is in brackets before reading the question. For women who were asked Q. 316, just ask the question that is not in brackets. If the respondent says she does not know how old she was when she first had intercourse, probe by relating it to how old she was when she first got married or had her first child. However, when doing this probing, be certain not to assume that the first time she had sex was at the time of her first marriage. If she says her first time was when she started living with her (first) husband, record it as such by circling '95'.

Check to make sure that the age at first intercourse and the age at first birth (calculated by subtracting the woman's year of birth from the year of birth of the woman's first child) are consistent. The age at first intercourse should not be later than her age at first birth. If her reported age at first intercourse (Q. 317) is older than her age at first birth, there is a mistake in the year of birth of her first child, her own year of birth, or her age at first intercourse. Check to see which information is wrong and correct it. If she has never had intercourse, circle code '00'.

E. SECTION 3B: CONTRACEPTION

This section collects information on the knowledge and use of various contraceptive methods which a couple can use to avoid or delay pregnancy. Questions about the use of methods of contraception apply to all partners of respondents, whether or not the couple is currently living together or married. For example, if the respondent has been married more than once, it does not matter with which particular husband she may have used a method.

The topic of contraception and family planning may be considered a personal matter by a respondent, and she may feel embarrassed to talk about it. To overcome her embarrassment, you must show that you do not feel embarrassed or uncomfortable in any way. Ask these questions as if they were no different from any other questions in the questionnaire. If she is hesitant to answer any of these questions, reassure her that everything she says will be treated confidentially and that the same questions are being asked of women all over the country.

GENERAL NOTE ON CONTRACEPTIVE TABLE

The contraceptive table asks the respondent about her knowledge, as well as use, of specific contraceptive methods. In the first column of the table, you will record the respondent's knowledge of specific methods, while in the second column, you will record whether she has ever used each of the methods that she has heard of.

Follow the steps below to fill this table:

Step 1: Read the introductory sentence at the top of the table. Then ask Q. 318 and wait for the respondent to mention the contraceptive methods she knows about. Circle '1' in the first column for each method that she mentions spontaneously.

Step 2: Now proceed down the list of methods, asking "Have you ever heard of _____?" for any methods that the respondent did not mention, reading the name and description of each method not mentioned spontaneously. Circle code '1' if she knows the method and '2' if she does not know the method.

Step 3: Conduct the check in 319. If Q. 316 is YES or it was not asked, proceed to step 4 below for known methods. If not, skip step 4 and go straight to Q. 323.

Step 4: After you have completed the list of methods asking about knowledge, return to the top of the list and ask Q. 320 (ever use) for each method that the respondent has heard of.

It is important that you follow the above procedure of first asking about knowledge for all methods before asking about use, so that the respondent does not become confused about whether you are asking about knowledge or use of a particular method.

Q. 318: KNOWLEDGE OF WAYS TO DELAY/AVOID PREGNANCY

Read the statement at the top of the table: "Now I would like to talk about family planning - the various ways or methods . . ." Then read Q. 318: "Which ways or methods have you heard about?" Wait for the woman to tell you which methods she knows about. Circle '1' for YES for each method that she mentions spontaneously. If she mentions a traditional or folk method (such as herbs) or any method not listed in the table, circle '1' for Method 11 at the bottom of the table and write the name(s) of the method(s) in the space provided (see illustrative contraceptive table below). If she mentions more than two other methods for Method 11, record only the first two methods mentioned.

Check that you have recorded all methods the respondent mentioned spontaneously. Then, for each method she did not mention spontaneously, ask whether she has heard of the method. For example, if she did not mention the pill spontaneously, ask her about it, reading the description of the method: "Have you ever heard of the pill? Women can take a pill every day or every week to avoid becoming pregnant." If she says she has heard of it, circle '1' for YES. If she has never heard of the pill, record NO by circling '2.' Repeat this for each method not mentioned spontaneously, reading the description of each method.

At first you may feel embarrassed to talk about and describe these methods, but remember, if you are embarrassed, you may increase the embarrassment of the respondent. You should keep from smiling or giggling so that you encourage her to be direct and to feel more comfortable talking with you about this subject.

It is important for you to have some knowledge of these contraceptive methods yourself and you must be familiar with names that people use to refer to each method. Some additional information about selected methods is given below:

FEMALE STERILIZATION. There are several types of operations a woman can have that will make her sterile, including a "tube tie" or the removal of the uterus (i.e., a

hysterectomy) or ovaries. Operations to remove the womb or uterus are usually performed for reasons other than to provide contraceptive protection, e.g., because the woman experienced a problem during delivery, the woman had recurrent spells of heavy bleeding, or cancer was found. Only when an operation is performed to enable the woman to stop having children should you record it as a sterilization.

MALE STERILIZATION. This is a comparatively minor operation done on men for contraceptive purposes. It is also called vasectomy. In recent years, the “no scalpel” vasectomy has become more common.

PILL. This is a pill the woman takes every day or once a week for one type of pill. The pill taken every day is a combination of oestrogen and progesterone (hormones) which prevents the ovary from releasing an egg. These pills are also known as 'Mala D' and 'Mala N' in India. The pill taken once a week is a non-hormonal pill known as “Saheli.”

IUD/LOOP. Lippes Loop and Copper T are common types of IUDs available in India. An IUD (intra-uterine device) is a foreign body inserted in the uterus, which prevents a fertilized egg from being implanted in the uterus wall. It is designed to remain in the uterus for 2-3 years and needs to be inserted by a medical person. Another type available from private practitioners is Multilode (this is a Copper T with an additional amount of copper, providing a longer life). In some states, the IUD is known as 'Tambi'.

INJECTABLES. An injection of hormone that is released slowly into the bloodstream can be given regularly to women to prevent pregnancy. The most common type of injectable contraceptive is given every three months. This is known as *depomedroxyprogesterone acetate* (DMPA), Depo-Provera, Depo, or *Megestron*^R. Another injectable contraceptive, NET (also called *Noristerat*^R) is given every two months.

FEMALE CONDOM. A thin, transparent rubber can be placed in the vagina before having sex to avoid pregnancy.

RHYTHM METHOD. This is also called the safe period, periodic abstinence, the calendar method, or the standard days method. This method is based on the principle that by not having sexual relations on certain days of her monthly cycle, a woman can avoid becoming pregnant. Note that this is not the same as prolonged abstinence where the couple stops having sexual relations for months at a time to avoid pregnancy without regard to the woman’s monthly cycle. To ensure that the respondent understands, stress the phrase “on the days of the month she is most likely to get pregnant.” If a woman does not feel like having sex on particular days of her cycle, that does not mean that she is using the rhythm method.

EMERGENCY CONTRACEPTION. To avoid becoming pregnant after unprotected sex, women can take pills up to three days after having sex. These pills are also called “morning-after pills.”

Methods not specifically described in the table which a woman may mention include:

DIAPHRAGM. Diaphragms and cervical caps are soft rubber cups that can be placed in the vagina to cover the cervix to block sperm from entering the uterus and tubes where sperm could meet an egg. Diaphragms and cervical caps should be used with spermicidal jelly or cream.

FOAM OR JELLY. Spermicides, including foam, cream, jelly, foaming tablets, or suppositories, are used to kill sperm or make sperm unable to move toward the egg.

ANY OTHER METHOD(S). Women may mention traditional methods such as certain herbs or medicines. If so, write the name of the method(s) in Method 11. If she mentions prolonged abstinence or breastfeeding, write these down, since she considers them methods of family planning.

In 319, remember to check Q. 316 and follow the appropriate skip pattern before continuing with the next question. Never married women who have never had sexual intercourse will skip Qs. 320-322.

SECTION 3B. CONTRACEPTION

318	<p>Now I would like to talk about family planning - the various ways or methods that a couple can use to delay or avoid a pregnancy.</p> <p>Which ways or methods have you heard about? FOR METHODS NOT MENTIONED SPONTANEOUSLY, ASK: Have you ever heard of (METHOD)?</p> <p>CIRCLE CODE '1' IN 318 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN COLUMN 318 READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY. CIRCLE CODE '1' IF METHOD IS RECOGNIZED AND CODE '2' IF NOT RECOGNIZED. THEN PERFORM THE CHECK AT THE BOTTOM OF THE COLUMN. IF 316 = YES OR NOT ASKED, ASK 320 FOR EACH METHOD WITH CODE '1' CIRCLED IN 318.</p>	320 Have you ever used (METHOD)?	
01	FEMALE STERILIZATION Women can have an operation to avoid having any more children.	YES ① NO 2 ↘	Have you ever had an operation to avoid having any more children? YES 1 NO ②
02	MALE STERILIZATION Men can have an operation to avoid having any more children.	YES 1 NO ② ↘	Has your husband/partner ever had an operation to avoid having any more children? YES 1 NO 2
03	PILL Women can take a pill every day or every week to avoid becoming pregnant.	YES ① NO 2 ↘	YES ① NO 2
04	IUD OR LOOP Women can have a loop or coil placed inside them by a doctor or a nurse.	YES 1 NO ② ↘	YES 1 NO 2
05	INJECTABLES Women can have an injection by a health provider that stops them from becoming pregnant for one or more months.	YES 1 NO ② ↘	YES 1 NO 2
06	CONDOM OR NIRODH Men can put a rubber sheath on their penis before sexual intercourse.	YES ① NO 2 ↘	YES ① NO 2
07	FEMALE CONDOM Women can place a sheath in their vagina before sexual intercourse.	YES 1 NO ② ↘	YES 1 NO 2
08	RHYTHM METHOD Every month that a woman is sexually active she can avoid pregnancy by not having sexual intercourse on the days of the month she is most likely to get pregnant.	YES 1 NO ② ↘	YES 1 NO 2
09	WITHDRAWAL Men can be careful and pull out before climax.	YES ① NO 2 ↘	YES 1 NO ②
10	EMERGENCY CONTRACEPTION Women can take pills up to three days after sexual intercourse to avoid becoming pregnant.	YES 1 NO ② ↘	YES 1 NO 2
11	Have you heard of any other ways or methods that women or men can use to avoid pregnancy?	YES ① _____ (SPECIFY) _____ (SPECIFY) NO 2	YES 1 NO ② YES 1 NO 2
319		CHECK 316: YES OR GO TO 320 NOT <input checked="" type="checkbox"/> FOR KNOWN ASKED METHODS NO <input type="checkbox"/> SKIP TO 323	

Q. 320: EVER USE OF CONTRACEPTIVE METHODS

After you have completed the filter in Q. 319, you are ready to ask the respondent about use of contraception. However, before you ask Q. 320 for each method, check whether the respondent reported having knowledge of the method in Q. 318, i.e., that a '1' was circled in Q. 318, indicating that the respondent has heard of the method. Do not ask Q. 320 for methods the woman has not heard of (Code '2' circled in Q. 318).

When asking about the use of female sterilization, say, "Have you ever had an operation to avoid having any more children?" If the woman indicates that she has had such an operation, probe to determine that the operation was undertaken for contraceptive purposes, i.e., because the woman wanted to avoid having more children and not because the woman had health problems which necessitated the removal of the uterus or ovaries.

In asking Q. 320 for male methods, such as the condom and withdrawal, use the phrase, "Have you and your husband ever used (condoms/withdrawal)?" Similarly, when asking about male sterilization, say, "Has your husband/partner ever had an operation to avoid having any more children?" If she has never been married, use the word "partner" in the question on male sterilization. If she has had more than one husband, we are interested in finding out whether any of them ever used condoms or withdrawal with her or was sterilized. Remember that the answer to this question is YES even if the husband used a method for only a short time or if the woman used the method with only one husband. Note, however, that we are asking for only those methods that the husband has used with the respondent, not with any other wife or partner.

If she has named any other methods in Q. 318 (Method 11), be sure to ask whether she ever used them in Q. 320 and record her answer.

Q. 321: FILTER FOR EVER USED A METHOD

This is a filter for you to screen women according to whether they have ever used any method or have never used any method. Check the answers to Q. 320 and mark the appropriate box in Q. 321. The box on the left which is labelled NOT A SINGLE "YES" is for a woman who does not have a single YES recorded in Q. 320. This would be a woman who has never used any method of contraception. Note that even if there are no responses at all recorded in Q. 320 because the woman has never heard of any method, you will still mark the NOT A SINGLE "YES" box on the left, since she has never used any method of contraception. The box on the right which is labelled AT LEAST ONE "YES" is for a woman who has at least one YES recorded in Q. 320. This means the woman has used at least one method of contraception including any method coded under 'other'.

Qs. 322 AND 324: PROBE FOR EVER USE

The purpose of these questions is to be certain that the respondent (herself or with any husband or partner) has never used anything to delay or avoid getting pregnant, since contraceptive use is one of the most important features of the survey.

If the woman responds YES to Q. 322, ask Q. 324 to find out what she has used or done. Note that you cannot record the answer to Q. 324 in the coding section to the right of the question. Instead, you must go back to the contraceptive table and correct Qs. 318, 320, and 321. For example, if the woman says here that her husband has used a condom with her, you may have to change Q. 318 in the row for the condom from code '2' to Code '1.' Then, you must change Q. 320 to code '1.' Finally, correct the filter in Q. 321 and then continue with Q. 325.

Q. 323: ENTER NONUSE OF CONTRACEPTION FOR THOSE WHO HAVE NEVER HAD SEX AND THOSE WHO HAVE NEVER USED CONTRACEPTION

Information on nonuse during the period since January 2001 must be entered in Column (1) of the calendar. Q. 323 is for two groups of women: those who have never had sex and thus are not asked about contraceptive use, and those who have had sex but have never used contraception. For both these groups of women, record '0' in Column (1) of the calendar for each blank month up through the month of interview. For women who have never had sex, you will enter a '0' in all the months for Column (1) up through the interview. For other women who have responded to Q 320 that they (or their husband) have never used a method to delay or avoid pregnancy, record '0' in Column (1) of the calendar in each blank month (where there is no 'B,' 'P,' or 'T' code) up through the month of interview. Now, for both groups of women who have never used a method of family planning, there should be some code in each the month or interview and in each previous month in Column (1). Once you have completed Q. 323, skip to Q. 353.

Q. 326: LIVING CHILDREN WHEN FIRST USED FAMILY PLANNING

This question is asked only to women with children. The question refers to the number of living children the respondent already had the first time she used a method to avoid getting pregnant. If she started to use family planning when she did not have any living children, record '00.'

Qs. 327-328: FILTERS FOR FEMALE STERILIZATION AND PREGNANCY STATUS

These filters ensure that the questions that follow relating to the current use of contraception will not be asked of women who have been sterilized or women who are pregnant.

Qs. 329-330A: CURRENT USE OF CONTRACEPTION

These questions are some of the most important in the questionnaire. Since methods are effective for different lengths of time, you may have some difficulty deciding whether a particular respondent is currently using a method. Coitus-related methods such as condoms, vaginal methods and withdrawal are used with each act of intercourse, so current users of these methods will have used them during the most recent acts of intercourse. Current users of the pill should be taking pills daily or weekly depending on the type of pill it is.

Other methods provide ongoing protection without daily or regular action by the woman. Contraceptive injections may have been administered two to six months earlier and still provide protection. An IUD, once inserted, protects against pregnancy until it is removed or expelled.

Note that a woman might mention that she is using an implant for her method of contraception. Also called Norplant, these are small rods surgically implanted in a woman's upper arm. They usually protect a woman against pregnancy for five or more years.

If the woman reported in Q. 320 that she had been sterilized in order to avoid having another child, you will record FEMALE STERILIZATION as the current method without asking her which method she is currently using.

If the woman's current husband has been sterilized, you will record MALE STERILIZATION as the current method. If, however, she is no longer married to an ex-husband who had a vasectomy, this should not be recorded as the current method.

If the woman mentions more than one method, circle the code for all methods that are currently being used. If more than one method is circled, follow the skip instruction for the highest method on the list and ask the subsequent questions about that method.

Check to be sure that the response to Q. 330 is consistent with the responses to Q. 318 and Q. 320. For example, the respondent may say that she is using the pill, but reported in Q. 318 that she did not know the pill or reported in Q. 320 that she has never used the pill. If this happens, probe further and correct the responses in Q. 318 to Q. 330 as necessary.

While it is not common, you may encounter a woman who has had a hysterectomy, which is the surgical removal of all or part of the uterus and the ovaries. Such a woman is unable to become pregnant, and therefore does not need to use contraception in order to avoid pregnancy. But because the operation is usually not performed for contraceptive reasons, we will consider a woman with a hysterectomy as a nonuser of contraception. She is similar to a woman who is menopausal. In Q. 329, her response would be NO (she is not currently using).

Qs. 331-332 PILL (CONDOM) BRAND

If the pill or condom is reported as the current method in Q. 330, we would like some further information about the methods. First we are interested in the brand of pills or condoms that is being used. Knowing the brand of pill or condom can help to assess the popularity of certain brands that may be offered in special 'social marketing' programmes. In addition, with regard to the pill, there are special types of pill that are appropriate for use by breastfeeding mothers; the information on pill brand can be used to look at the coverage of these types of pills among users who are still breastfeeding.

Ask first to see the package of pills or condoms that is being used. If you are able to see the pill or condom package, circle '1' in Q. 331 and specify the brand in the space provided. If the pill or condom packet is not available, circle '2' and then ask Q. 332 to determine if the user is able to identify the brand. The user may not be able to name the brand but instead may describe the packaging. It is important that you probe and write in the margin as many details as she is able to provide since it may be possible to determine the brand from her description. When writing the name of the pill or condom brand, be sure to write the entire name. For example the pills 'Mala-D' should be written with the D not just as 'Mala', or for 'Kohinoor Deluxe' condoms write both words not just 'Kohinoor'.

You should not fill in the boxes if the user shows you a pill or condom packet or names the brand that is being used. These boxes will be filled in the office during the data entry phase of NFHS-3.

Finally, in probing to obtain information on the pill (or condom) brand, you may find out that the method is not being used currently. For example, a pill user may tell you that she has not obtained a packet of pills for several months. If it is determined while inquiring about the brand of pills or condoms that the woman is not currently using the method, Qs. 329-330 should be corrected.

Q. 333 NUMBER OF PILL CYCLES/CONDOMS

Information on the number of pill cycles or the number of condoms obtained the last time is useful as input into contraceptive security programmes that are concerned with planning to ensure that users have access to a reliable supply of pills or condoms. Knowing the quantities that pill or condom users typically obtain or purchase provides useful input into forecasting contraceptive needs. Information that most users obtain only a single pill cycle or condom at a time also can aid in understanding patterns of discontinuation of these methods since users may be more vulnerable to stopping use because they run out of pills or condoms before they acquire a new cycle or condom. Finally, when combined with the information in Q. 334 on the amount the user paid for the method, these data can help in estimating the average cost of contraception for pill or condom users.

Q. 334 COST OF METHOD

This question is asked of users of temporary modern contraceptive methods. This question seeks information about the amount the user paid to obtain the method. It is important that you read the question carefully so that the user understands that: (1) you are referring to the last time the method was obtained, and (2) you want to know the total amount paid including any fees that might have been paid for the consultation with the provider from whom the method was obtained as well as the charge for the method.

It is possible that the respondent will not know the exact amount that was paid if she did not obtain and/or pay for the method herself or if another party (e.g., a health insurance scheme) was responsible for the costs. In those circumstances, you should circle '9998' for DON'T KNOW since there was a cost involved in obtaining the method, but she does not know how much it was. Circle '9995' for FREE only in cases where the provider from whom the method was obtained did not charge for the method.

It may be difficult to obtain a precise, accurate response to this question, particularly when the method was obtained a considerable time prior to the survey. If you have questions about what to record, note them in the questionnaire and discuss the appropriate response with your team supervisor.

Q. 335: WHERE STERILIZATION WAS DONE

This question applies to either the respondent's or her husband's sterilization. Circle the code that indicates the type of facility where the sterilization took place.

When choosing a code, you need to know whether the place is in the public sector (run by the government) or in the private sector. If the place is run by a nongovernmental organization or trust, use code '21.' Only record PRIVATE DOCTOR if the doctor has his/her own practice, which is not located within a larger facility. If it was done by a doctor in a private hospital, circle code '31'.

If the respondent does not know whether the facility is public or private, write the name of the facility in the space provided, and inform your supervisor after you complete the interview. Since you have recorded the name of the facility, your supervisor will be able to find out whether it is public or private and will circle the appropriate code.

Q. 337: INFORMED ABOUT CONSEQUENCES OF STERILIZATION

We want to know whether the woman was told before the sterilization operation that once sterilized she would not be able to have any (more) children.

Q. 338: OPINION ON CARE DURING AND AFTER THE STERILIZATION

Read out the question in its entirety before recording the answer. We are interested in the woman's opinion about the services she received during or immediately after she received the sterilization operation.

Q. 339: COST OF STERILIZATION

This question seeks information about how much, in rupees, it cost to have the sterilization performed. It does not matter who paid for the operation, just how much the operation itself cost. In determining the cost, the woman should take into account all charges including any fees that might have been paid for the consultation with the doctor as well as the cost of the operation.

Transportation costs are not to be included. If the sterilization was performed as part of the respondent's delivery, do not write down the cost of the delivery and the sterilization; ask how much the sterilization alone cost.

Q. 340: REGRET ABOUT STERILIZATION

Ask the respondent if she regrets that she had the sterilization. If she is not sure, ask her how she feels most of the time about having been sterilized and record her answer.

Q. 341/341A: DATE OF STERILIZATION OPERATION/START OF CURRENT METHOD

For respondents who have been sterilized or whose husbands have been sterilized, ask Q. 341. If the respondent does not remember the date, probe to help her remember. Relating the date to the age and date of birth of her youngest child may help. You must get a date, even if it is just your best estimate. Once you have recorded the date, continue to Q. 342.

For users of other family planning methods, ask when she started using the method most recently without stopping. For example, a woman started using the pill in June 2001. A few months later, she stopped taking the pill because she wanted to become pregnant. She gave birth to a child in January 2004 and started using the pill again in March 2004. When interviewed, she is still using the pill. In this case, record '03' for MONTH and '2004' for YEAR.

Q. 342: CHECK CONSISTENCY OF DATE CURRENT USE STARTED

Check to see whether the date of birth of her last child or last pregnancy termination is AFTER the date she has given in Q. 341/341A. If it is YES, ask the question again and make it clear to the respondent that we mean the date that she started using the current method WITHOUT STOPPING for any reason including a pregnancy. For example, a woman cannot have used the pill continuously for three years if she had a baby last year. For women who have been sterilized but the sterilization has failed, you will have to go back and ask Q.329 to find out if the woman is currently using any method (since she is not currently protected by her sterilization). Then follow the correct skip pattern. Be sure to delete the female sterilization responses in Qs.335-341 (unless she has been re-sterilized since her last pregnancy).

Q. 343: ENTER CURRENT USE ON CALENDAR

If the year in Q. 341/341A is 2001 or later, mark the box on the left and enter the code for the method currently used in Column (1) of the calendar in the month of interview and in each month back to the date she started using the method or was sterilized. If she has been using her current method for a long time, write the code in the current month and the beginning month, and join them with a squiggly line. Do not draw the squiggly line through months she did not use the method.

If the woman started using her current method in 1999 or earlier, mark the box on the right, and enter the code for the method currently used in Column (1) of the calendar in the month of interview and in each month back to January 2001. Then skip to Q. 351.

Make sure that you use the method codes shown to the left of the calendar and not the codes shown in Q. 330, since the codes are different for most contraceptive methods.

Q. 344: CONTRACEPTIVE HISTORY

Q. 344 asks both current and past users of contraception about their history of contraceptive use since January 2001. Begin by reading the introductory sentence, so that the respondent understands what information you are asking for.

The events that are already recorded in the calendar (birth dates, names, pregnancies, and pregnancy losses) are helpful reference points for you and the respondent. For each period of time in Column (1) that is still empty (no 'B,' 'P,' or 'T' or contraceptive method code), you need to enter a code that reflects the respondent's contraceptive history. To do this, you need to find out several pieces of information:

- 1) Was the respondent using a method of contraception in a period of time, and if so, what method was she using?
- 2) When did she start using that method?
- 3) For how long did she use that method continuously; when did she stop using that method?
- 4) What happened when she stopped using that method? Did she not use any method, did she start using a different method, or did she become pregnant?

For example, if the respondent has two births, Sanjana and Raja, you could ask a series of questions that would fill in the respondent's contraceptive history in the period of time between the births of Sanjana and Raja. The first question you could ask would be, "**Between the births of Sanjana and Raja, did you use any contraceptive method or not?**" (The respondent tells you that she used condoms.) You would then ask, "**How long after the birth of Sanjana did you begin using condoms?**" (She tells you the third month after the birth of Sanjana.) This gives you the starting month in which she began using condoms, but you also need to know for how long she used condoms continuously and when she stopped using them. So you could ask, "**For how long did you use condoms continuously?**" (She tells you ten months.) Now you know when she started using condoms and when she stopped. Record '7' for condom use in the third month after the birth of Sanjana and in the next nine months. Now, if there are 15 months between the birth of Sanjana and the time she became pregnant with Raja. You now need to find out what the respondent was doing between the time she stopped using the condom and became pregnant with Raja. Ask a question such as, "**After you stopped using the condom, and before you became pregnant with Raja, did you use any contraceptive method or not?**" (She tells you she did not use any method.)

Now you know:

- 1) She used a contraceptive method between Sanjana and Raja and which method she used
- 2) At what point she began using that method after the birth of Sanjana
- 3) For how long she used that method continuously and when she stopped using that method
- 4) She did not use another method after she stopped using the condom and before the birth of Raja.

This gives you the respondent's complete contraceptive history between the births of Sanjana and Raja.

You would continue in a similar way until you have filled in each empty month of Column (1) with a code. Enter the codes of the methods she used in each month of use and '0' in the months where she did not use a method. After you have recorded periods of use and nonuse, Column (1) should be completely filled, up through the month of interview. You will have accounted for every month since January 2001 by recording the appropriate codes for births (B), current pregnancies (P), lost pregnancies (T), use of contraception, or nonuse of contraception.

After completing Column (1), you must complete Column (4). For each of the times there is an interruption of contraceptive use in Column (1), you need to ask the respondent why she stopped using that method. Do this by asking, "**Why did you stop using the (METHOD)?**" Record the reason for the interruption in Column (4) in the same month as the last month of use

of that method recorded in Column (1).

For example, when a woman stops using condoms, in the next month she may:

- a) Be using a different method
- b) Not be using any method
- c) Be pregnant.

In cases in which a respondent tells you she used the method until she got pregnant, you will ask, “**Did you become pregnant while using (METHOD), did you stop to become pregnant, or did you stop for some other reason?**” If she responds that she became pregnant, probe to determine that she did in fact become pregnant while she was still using the method. Enter code ‘1’ in Column (4) if that was the case. However, it may happen that several months passed between the time that she stopped using the method and actually became pregnant. To determine the number of months, ask, “**How many months passed between the time you stopped using (METHOD) and you became pregnant with (NAME)?**” Enter ‘0’ in Column (1) for each month she was not using a method and in Column (4) record ‘2’ (wanted to become pregnant) in the month that she stopped using the condom.

Q. 345: FILTER FOR CURRENT METHOD

Look back to Q. 330/330A and circle the same method here; this is the method currently being used. If more than one method code is circled in Q. 330/330A, circle only the code for the highest method in the list.

Qs. 346-348: TOLD ABOUT SIDE EFFECTS

Qs. 346-348 ask about the information a current user received about the side effects or problems associated with her current method. Q. 346 asks whether the user was told about potential side effects or problems at the time she obtained her current method. If there has been more than one episode of the use of the method, ask about the time that she started using the method during the **current** episode of use.

Q. 347 is asked of a current user who reports she was not told about problems associated with using her current method at the time she obtained it. This question is concerned with whether the user was told about these problems at any time, either during or prior to the current segment of use by a health or family planning worker. Note that you would record ‘NO’ if the respondent indicates she was told about side effects or problems by a friend or relative but not by a health provider.

Q. 348 seeks information about whether a current user who was ever informed about the side effects or problems she might experience in using her current method was advised about what to do if she experienced any side effects or problems in using the method. For women who were informed at the time they began using (YES in Q. 346), the question refers to that particular time. For women who were not informed at that time, the question refers to the time(s) she was informed about side effects or problems she might have with the method.

Qs. 349-350: TOLD ABOUT OTHER METHODS

In these questions, a current user is asked whether she was told about other methods of family planning at the time she obtained her current method. For example, if a pill user says that a health worker told her about the injection, the pill, and the IUD at the time when she started to use the pill, circle ‘1’ in Q. 349. Users who were not told about any other method at the time they started using their current method should be asked Q. 350 to find out if they have ever received information about other family planning methods from a health or family planning worker.

Q. 351: FILTER FOR CURRENT METHOD

Circle the code for method currently being used after checking Q. 330/330A. If more than one method code is circled in Q. 330/330A, circle only the code for the highest method in the list.

Q. 352: SOURCE OF CURRENT METHOD

Mention the current method circled in Q. 351. For example, if she is using condoms with her husband, ask, "Where did you obtain the condoms the last time?" If she says her husband or someone else got the method for her, ask whether she knows where that person got it, and record the source. If the method required a prescription, this question pertains to where the prescription was filled.

When choosing a code, you need to know the type of place the method was obtained from. For example, if the woman tells you she got her pills from a doctor, ask her where the doctor is located. You will also need to find out if the place is in the public sector (run by the government) or in the private sector. If it is run by a nongovernmental organization, circle code '31'. Record PRIVATE DOCTOR only if the doctor has his/her own practice that is not located within a larger facility.

If the respondent does not know whether the facility where the method was obtained is public or private, ask the respondent the name of the facility, record it in the space provided, and inform your supervisor after you complete the interview.

Qs. 353-355: TOLD ABOUT ANY METHODS AND KNOWS SOURCE FOR METHODS

Qs. 353-355 are asked only of women who are not currently using contraception. In Q. 353, the respondent is asked whether she was ever told by a health or family planning worker about any methods of family planning.

Q. 354 is asked to find out if the respondent knows of a place where she can obtain a family planning method. Nonusers who report they are aware of a place where they can get a family planning method are asked in Q. 355 what place they know about. It is important to find out all of the sources that a woman may know. So be sure you use the probe ("Any other place?") after recording any source the woman mentions spontaneously.

Record her response to Q. 355 using the standard procedure given in Q. 335 to circle the appropriate code or to write the name of hospitals, health centres and clinics if respondents do not know if they are public or private. If she mentions more than one place where she can obtain a family planning method, record all her answers since this is a multiple-response question.

F. SECTION 3C: CONTACTS WITH HEALTH PERSONNEL

Q. 356: CONTACTS WITH ANM OR LADY HEALTH VISITOR

This question is asked to ascertain whether the respondent had any contact with an ANM (auxiliary nurse midwife) or Lady Health Visitor (LHV) in the last three months. If there was no contact with an ANM or LHV in the three months preceding the interview, circle code '2' and skip to Q. 358.

Q. 357: NUMBER OF CONTACTS WITH ANM OR LADY HEALTH VISITOR

If a respondent met with an ANM or Lady Health Visitor or both in the past three months, ask her how many times during this period they met at her home, at the anganwadi centre, and at a

health facility or camp. Then ask the respondent if there was any other place she met with an ANM or Lady Health Visitor and find out how many times they met there in the past three months. Note that '00' should be recorded for any row if she has not met with an ANM or LHV at that location in the last 3 months, but that all four rows cannot be '00'.

Qs. 358-359: CONTACTS WITH ANGANWADI OR OTHER COMMUNITY HEALTH WORKER

Question 358 is asked to ascertain whether the respondent met with an anganwadi worker or other community health worker such as an ASHA or MPW in the last three months. It does not matter where the meeting took place. If there was no contact with any such worker in the past three months, skip to Q. 361.

For women who met with an anganwadi worker, ASHA (Accredited Social Health Activist), MPW, or other community health worker, ask Q. 359 to find out the different types of health workers she met with.

Q. 360: NUMBER OF MEETINGS WITH ANGANWADI OR OTHER COMMUNITY HEALTH WORKER

If a respondent met with an anganwadi or other community health worker in the past three months, ask her how many times during this period they met at her home, at the anganwadi centre, and at a health facility or camp. Then ask the respondent if there was any other place she met with an anganwadi or other community health worker and find out how many times they met there in the past three months.

Q. 362: SERVICES PROVIDED BY VARIOUS HEALTH WORKERS

If a respondent met with any health workers mentioned in Qs. 356 and 359 in the past three months, ask her to tell you what services were provided and what matters were discussed. If she mentions more than one service, record all her answers since this is a multiple-response question.

Q. 363: MOST RECENT MEETING WITH A HEALTH WORKER

The respondent could have met more than one health worker in the past three months. We want to know in this question, which of these workers she met with in her most recent contact.

Qs. 364-365: OPINIONS ABOUT THE HEALTH WORKER WITH WHOM RESPONDENT LAST HAD CONTACT

Read out Q. 364 in its entirety before recording the answer. The question refers to the health worker she has had the most recent contact with (ANM, LHV, anganwadi worker, ASHA, MPW, or other) as mentioned in Q. 363. We want to know whether the respondent feels that this health worker talked to her nicely, somewhat nicely, or not nicely in this last meeting.

In Q. 365 we are interested in whether the respondent thinks that this same health worker tried to make sure that the respondent understood what the health worker was explaining.

Qs. 367-368: VISITS TO HEALTH FACILITIES OR CAMPS

Q. 367 is asked only of respondents who reported that they did not meet with any of the health workers mentioned in Qs. 357 and 360 at a health facility or camp. Ask the respondent if she has visited a health facility or camp for any reason in the past three months. Visits can include those made for herself or for her children.

In Q. 368, we are interested in the health facility visited most recently by the respondent for herself or for her children. Record her response to Q. 368 using the standard procedure given in Q. 335 to circle the appropriate code or to write the name of a hospital, health centre or clinic if the respondent does not know if it is public or private.

Q. 369: SERVICES SOUGHT DURING MOST RECENT VISIT TO HEALTH FACILITY

Q. 369 refers to the most recent visit made by the respondent to a health facility. If she mentions more than one service, record all her answers since this is a multiple-response question.

Q. 370: LENGTH OF WAIT AT HEALTH FACILITY

If the respondent received the service she went to the health facility for, enter the length of time she waited before receiving the service, including anytime in queues or waiting for the doctor, etc. If the answer is given in minutes, circle '1' and enter the time in minutes. If the answer is given in hours, circle '2' and enter the number of hours in completed hours. If the respondent did not have to wait at all for the service, circle code '995' for NO WAIT AT ALL. If she says she did not receive the service at all, circle code '996' for DID NOT RECEIVE SERVICE and skip to Q. 373.

Qs. 371-372: OPINIONS ABOUT HEALTH WORKER AT HEALTH FACILITY

These questions are concerned with the respondent's experience with the person who provided the service she went to the health facility for. Q. 371 asks the respondent if the person who provided the service was responsive to her problems and needs. Here we are interested in the respondent's perception of the responsiveness of the health worker.

Q. 372 asks her if the person who provided the service respected her need for privacy if she needed it. There can be many situations which require privacy. Examples are when the respondent is being examined or when she is being told something private. For this question, we want to know if the respondent's need for privacy was met.

Q. 373: CLEANLINESS OF HEALTH FACILITY

This question is again referring to the last health facility the respondent visited. Here we are interested in the respondent's perception of the cleanliness of the facility.

G. SECTION 4: PREGNANCY, DELIVERY, POSTNATAL CARE, AND CHILDREN'S NUTRITION

The objective of this section is to obtain information related to the health care women receive related to childbearing including antenatal care, delivery care, and postnatal care. The section also collects information on the prevalence of postnatal checkups for newborns and child nutrition. The section asks about births that occurred in January 2001 or later. Thus, if a woman did not have a birth in this period, you will go on to the next section.

Q. 401: FILTER FOR BIRTHS IN JANUARY 2001 OR LATER

Check Q. 225 and mark whether the respondent has had one or more births in January 2001 or later.

Qs. 402-404: COLUMN HEADINGS FOR BIRTHS IN JANUARY 2001 OR LATER

All births in January 2001 or later will be entered in the table. You will need to check Q. 215 to identify births the woman may have had during this period.

For each birth in January 2001 or later, beginning with the last birth (which will be found in the last row that is filled in the birth history unless you had to renumber births), record the line number and the child's name (found in Q. 212) in Qs. 403 and 404. Also mark in Q. 404 whether the child is alive or dead after checking for this in Q. 216. Then fill in the child's name at the top of the subsequent pages in Section 4 as needed. Consider twins as separate births and list them in separate columns, taking care to keep their positions in this table consistent with their order in the birth history. Recall that if the last children in Q. 212 are twins and one twin is dead, the living twin should be recorded as the last birth.

EXAMPLE: If the last births were twins, Priya (Line 07 in Q. 212) and Jamil (Line 08 in Q. 212), Jamil should be recorded as the LAST BIRTH in this table and Priya as the NEXT-TO-LAST birth if both of them are alive or both of them have died.

If the respondent has had more than three births in January 2001 or later, write SEE CONTINUATION SHEET at the top of Section 4. Take a fresh Woman's Questionnaire, fill in all the information in the identification block on the cover page and write CONTINUATION on the top. On the second Woman's Questionnaire, change the heading of the second and third columns to "THIRD-FROM-LAST BIRTH" and "FOURTH-FROM-LAST BIRTH" as needed, and record the name and line numbers for the additional birth(s). **Leave the first column of the second questionnaire blank.** Then return to the original questionnaire to begin asking the questions for the last born child.

Ask all the relevant questions in Section 4 for the last-born child before asking questions for the next-to-last birth, etc. When asking questions, be sure to insert the name of the child where indicated so there is no confusion about which child you are referring to.

You will notice that the set of questions on prior births is more limited than the questions for the last birth. It is very important that you ask all of the appropriate questions for these births so you will need to follow the skip instructions carefully. You should not proceed to Q. 478 until you have asked the appropriate questions for all births the woman had in January 2001 or later, including any births you may have had to record in a second questionnaire.

Q. 405: DESIRED TIMING OF PREGNANCY

This question is asked to ascertain whether the respondent's children were wanted or unwanted and, if wanted, whether they were born sooner than preferred. Read the entire question to the respondent before accepting an answer, stressing the underlined words.

Q. 406: HOW LONG TO WAIT

Record the answer in either months or years, and circle the corresponding code. If the respondent gives a general answer such as "I would have liked to have waited until I was ready," ask her how many months or years she would have liked to have waited. Record the extra time that she would have liked to have waited before becoming pregnant.

EXAMPLE: A woman became pregnant 18 months after her previous birth but she tells you she would have preferred a two-year (24-month) interval before becoming pregnant again. You would circle 1 for MONTHS and record '06' in the adjacent boxes (24-18 = 6).

Qs. 407-408: PREGNANCY REGISTRATION

One of the duties of an ANM is to register pregnancies. If the respondent's pregnancy was registered with the ANM, circle code '1'. If the pregnancy was not registered with the ANM, skip

to Q. 409. For these questions, we are interested in registration with an ANM, not with any other health professional or authority.

For those women whose pregnancy was registered with the ANM, ask Q. 408. This question asks if she received a registration card from the ANM during the pregnancy.

Q. 409: ANTENATAL CARE PROVIDER(S)

This question refers to any antenatal care given by a health care provider to the respondent during her pregnancy. The care should have been specifically to check her pregnancy and not for other reasons.

This is a two-part question because if the respondent answers YES, you will ask whom she saw. Since we are interested in all of the persons the woman saw, you must use the prompt (e.g., “Anyone else?”) to make sure the woman informs you about all the persons from whom she received care for the pregnancy.

Q. 410: PLACE(S) WHERE ANTENATAL CARE WAS RECEIVED

This question seeks information on where the woman received care for her pregnancy. Antenatal care is usually given at a health care facility but is sometimes provided in the pregnant woman’s home or in the anganwadi centre.

Similar to Q. 409, we are interested in all of the places where the woman received antenatal care. Be sure to use the prompt (“Any other place?”) and record all the places where she was provided care.

When choosing a code, you need to know whether the place is in the public sector (run by the government) or in the private sector. If the place is run by a nongovernmental organization, use code ‘L’. If the respondent does not know whether the facility is public or private, write the name of the facility in the space provided, and inform your supervisor after you complete the interview.

Q. 411: MONTHS PREGNANT AT FIRST ANTENATAL VISIT

Ask the respondent how many months into her pregnancy she was when she received her first antenatal care. If she does not remember, ask her how many periods she had missed at the time.

Q. 412: FREQUENCY OF ANTENATAL CHECKUPS

Then ask her how many times in total she saw someone for antenatal care during her pregnancy. This refers to care related to her pregnancy and should not include seeing a doctor or nurse for other reasons.

Q. 413: TESTS PERFORMED DURING ANTENATAL CHECKUPS

We want to know whether each of the tests listed was performed on the respondent or the information listed was given to the respondent during any of the antenatal checkups she had for the last pregnancy. It does not matter if this happened only once or more than once, or was done in the same visit or spread over several visits. Ask about each test/type of advice and record the response before asking about the next item. Brief explanations are given below for selected tests.

BLOOD PRESSURE is measured with a medical instrument. A rubber cuff is wrapped around a person’s upper arm and is inflated. While slowly releasing air from the cuff, the person

measuring the blood pressure listens to the pulsing of the blood vessels with a stethoscope to determine the pressure. A BLOOD SAMPLE may be taken from the woman's fingertip or from a vein (usually from a vein near the elbow or on the wrist). The blood sample is used to test for various conditions and infections, such as anaemia, parasite infestations or infectious diseases. A URINE TEST can only have been performed if the health care provider asked the woman for a urine sample. An ABDOMINAL CHECK is generally done by feeling the abdomen or measuring it to monitor the pregnancy.

Qs. 414-415: PREGNANCY COMPLICATIONS

For Q. 414, find out whether the health care provider told the respondent during any of her antenatal visits about the problems related to pregnancy that are listed. Q. 415 asks whether the health care provider advised her about where to go if she experienced any pregnancy complications.

Qs. 416: PRESENCE OF CHILD'S FATHER FOR ANTENATAL VISITS

Q. 416 is asked to find out if the child's father was present during any of the respondent's antenatal visits. It does not matter if the father was present for just one or for all antenatal visits. We are interested in whether he was present for at least one visit.

Qs. 417-421: TETANUS TOXOID INJECTIONS

Neonatal tetanus is a disease that kills many babies. This disease can be prevented by transfer of immunity to the baby while still in the womb from a mother who has been adequately immunized. Another name for tetanus is lockjaw. If a local term exists for tetanus, it may be used in explaining the disease to the respondent. This immunization is usually given to the pregnant woman as an injection in the arm or the shoulder but can also be sometimes in her buttock.

Qs. 417-421 are designed to determine whether a respondent was adequately immunized against tetanus when she was pregnant with her last child. If a woman receives at least two tetanus injections during any pregnancy, she is considered to be adequately immunized to protect against neonatal tetanus. A woman also is considered to be adequately immunized during pregnancy if she has received at least five tetanus injections during her lifetime and the last booster was received within a ten-year period prior to the pregnancy.

Qs. 417-418 asks about whether the respondent received any tetanus injection during that pregnancy and, if so, how many times she was given the tetanus injection. A respondent who does not report receiving at least two tetanus injections during the pregnancy must be asked a few additional questions to assess whether she was adequately immunized at the time of her pregnancy. Q. 420 inquires about whether she received any tetanus injections prior to the pregnancy. If she received any tetanus injection prior to the pregnancy, she will be asked in Q. 421 how many years ago she received the last tetanus injection before the pregnancy.

Qs. 422-423: IRON TABLETS/SYRUP

Anaemia is a common problem during pregnancy. This problem is easily overcome by additional intake of iron. Pregnant women are often given a supply of or asked to buy iron tablets or syrup during their antenatal checkups. Q. 422 asks whether the woman was given any iron tablets or syrup during her pregnancy. If the woman is not aware of such tablets or syrup, probe by showing the sample tablets or syrup, and record the response. Note that we are not asking whether or not she consumed the tablets/syrup she was given or bought; rather, we want to know whether she had the tablets/syrup in her possession during the pregnancy.

If the respondent was given or bought iron tablets/syrup (YES in Q. 422), ask her for how many

days during her pregnancy she took the tablets/syrup. If she does not remember, ask her to estimate. Probe for the approximate number of days. In this question, unlike the previous one, we are interested in her consumption of the iron not just in her having it in her possession. Record the response in the boxes. Remember to put a leading zero in front if it is needed; 30 days would be '030'.

Q. 424: DRUGS FOR INTESTINAL WORMS

Treatment of intestinal parasitic infections has health benefits, including having a positive impact on the anaemia status of women during pregnancy. To see if the woman took any drug for intestinal worms during her pregnancy, we ask Q. 424.

Qs. 425-426: VISION PROBLEMS DURING PREGNANCY

We want to know whether at any time during the pregnancy the respondent experienced problems related to her vision. During pregnancy, especially in the third trimester, a woman may suffer from night blindness due to vitamin A deficiency. Night blindness is a condition in which a person has more difficulty than normal seeing when it is dark or in low light conditions.

In Q. 425, ask the respondent whether she suffered from problems with her vision during the day, for example, blurred vision. Do not include problems such as nearsightedness or farsightedness. In Q. 426, ask her about night blindness. Be sure to use the local term for night blindness so that the woman understands what condition you are referring to.

Q. 427: CONVULSIONS DURING PREGNANCY

For Q. 427, we want to know whether at any time during the pregnancy the respondent experienced convulsions that were not associated with a fever. Pre-eclampsia is a potentially fatal condition that may affect women during pregnancy. Women with pre-eclampsia may also develop convulsions, and this is called eclampsia. This problem is very serious, though not necessarily common. Convulsions are fit-like episodes in which people have uncontrolled muscular movement or muscular stiffness. The kind of convulsions we are interested in are when a woman's muscles contract uncontrollably. During convulsions a woman's eyes can roll back and she may lose consciousness. People can also tremble when they have fever, but we are not asking about this kind of trembling, which is more like shivering when you are cold.

Q. 428: SWELLING DURING PREGNANCY

Q. 428 is asked to find out if the woman experienced any swelling of her legs, body, or face during her last pregnancy.

Q. 429: EXCESSIVE FATIGUE DURING PREGNANCY

Women will often be tired during pregnancy; but here we are talking about her being more tired than she should have been. Ask the respondent if she experienced excessive fatigue during her last pregnancy. You should circle code '1' if she experienced excessive fatigue at any time during her pregnancy.

Q. 430: VAGINAL BLEEDING DURING PREGNANCY

Vaginal bleeding refers to any amount of vaginal bleeding during pregnancy, including spotting. Similar to Q. 429, circle code '1' if the respondent experienced any vaginal bleeding at all during her last pregnancy, regardless of the length of time the condition lasted.

Qs. 431-432: SUPPLEMENTAL NUTRITION FROM ANGANWADI CENTRE

Anganwadi centres are supposed to provide supplementary nutrition to pregnant women. For Q. 431, ask the respondent if she received any supplementary nutrition, specifically from the anganwadi centre, during her last pregnancy. If she says that, yes, she did receive supplementary nutrition from the anganwadi centre, you will also ask Q. 432. For this question, we want to know if she was always able to get the supplemental nutrition from the centre when she wanted it.

Qs. 433-434: MEETINGS WITH HEALTH WORKERS LAST 3 MONTHS OF PREGNANCY

If a respondent met in the last three months of her pregnancy with an ANM, Lady Health Visitor (LHV), anganwadi worker (AWW), or other community health worker, ask her where she met with them. If she did not meet with any of these types of health workers during the last three months of her pregnancy, circle code '4' and skip to Q. 435.

Q. 434 is only asked of those women who report that they met with at least one of the types of health workers listed in Q. 433 during the last three months of her pregnancy. Ask the respondent whether she received advice at least once during any of these meetings about breastfeeding, keeping the baby warm, the need for cleanliness at the time of delivery, and family planning or delaying her next child.

Q. 435: SIZE OF BABY

Read the entire question before accepting an answer. This is the woman's own opinion about the size of her baby. Some respondents may give you the baby's birth weight instead of a size. Insist that you want to know whether she thinks the baby was VERY LARGE, LARGER THAN AVERAGE, AVERAGE, SMALLER THAN AVERAGE, or VERY SMALL. If the respondent herself is unable to tell you the baby's size at birth, do not try to guess the answer based on birth weight information. Simply circle '8' for DON'T KNOW.

Qs. 436-437: WEIGHT AT BIRTH

These questions seek information on whether the baby was weighed at birth and, if so, the baby's weight. Notice that in Q. 437 there are two sets of boxes for recording the birth weight; the first is KILOGRAMS FROM CARD, and the second is KILOGRAMS FROM RECALL. KILOGRAMS FROM CARD refers to a written record of the birth weight on a document, such as the antenatal card, the birth certificate, or the vaccination card. KILOGRAMS FROM RECALL refers to the mother's verbal report of her child's birth weight, which she is reporting from memory. Fill in only one set of boxes and always record the birth weight from the card when possible. You will fill in the boxes for KILOGRAMS FROM RECALL only if there is no card available or no birth weight was recorded on the card.

When recording the birth weight, first circle the appropriate code in front of the boxes; '1' for KILOGRAMS FROM CARD and '2' for KILOGRAMS FROM RECALL, and then fill in the birth weight. If there is no weight available from a card and the respondent says she cannot remember the exact birth weight, ask her to give you her best estimate. Only record DON'T KNOW if she absolutely cannot remember even an approximate weight. If she gives you the weight in grams instead of kilograms, divide the number of grams by 1,000 (move the decimal point three places to the left) when recording the answer.

Q. 438: ASSISTANCE AT DELIVERY

Again, when asking the question, be sure to insert the name of the child you are referring to, so that there is no confusion. If she is not sure of the status of the person who attended the delivery, for example, if she does not know whether the person was a midwife or a traditional birth attendant, probe. We want to know who assisted with the delivery itself, not who helped in other ways such as boiling water or wrapping the baby in a blanket. The codes are letters of the

alphabet to remind you to circle codes for all the people she says attended her. If she says that no one assisted her, do not forget to ask whether any adults were present during delivery.

Q. 439: PLACE WHERE BIRTH TOOK PLACE

The intent of this question is to identify births delivered in a health facility. If the woman gave birth in a health facility, ask whether the place is in the public (run by the government) or private sector. If the place is run by a nongovernmental organization or trust, circle code '31.' Only if the respondent does not know whether the place is run by the government or is private, write the name of the facility in the space provided, and inform your supervisor after you complete the interview.

Q. 440: STAY IN HEALTH FACILITY FOLLOWING DELIVERY

This question is intended to find out the length of a woman's stay in a health facility following a delivery. Note that we are not concerned with the total time she spent at the facility but the time she remained in the facility after giving birth. In recording her response, first circle the appropriate code for the unit of time ('1' for HOURS, '2' for DAYS, or '3' for WEEKS) and then record the time she remained in the facility in the boxes next to that code. Remember to put a '0' (zero) before any number less than 10. Record '00' if she stayed in the facility for less than one hour after delivery.

Q. 441: CAESAREAN SECTION

A caesarean section is a delivery of a baby through an incision in the woman's abdomen and womb, rather than through the birth canal. Such a delivery is necessary for some women due to pregnancy complications. Find out whether the baby was delivered by an operation and not through the birth canal.

Qs. 442-445: POSTPARTUM CHECKUP FOR MOTHERS DELIVERING IN HEALTH FACILITY

Getting a postpartum checkup soon after the baby is born is crucial for the health of the mother. We are interested in knowing whether the respondent saw anyone for a postpartum checkup and if so, how many hours, days, or weeks after the birth the first checkup took place, and who performed the checkup. In this set of questions, we are asking only about a health checkup for the mother. If someone checked on the health of the baby, but not the mother, that checkup would not be included here.

Q. 442 is directed to women who delivered in a health facility and inquires whether any health personnel checked on the woman's health before she was discharged. If YES, there are additional questions about when after delivery the first checkup took place (Q. 443) and the type of provider who checked on her (Q. 444).

Questions 443 and 444 refer to the first checkup after the birth, so multiple answers are not allowed. In completing Q. 443, remember that you must first circle a code for the unit of time the respondent mentions (i.e., HOURS, DAYS, or WEEKS) and fill in a number in the boxes to the right of the code you circle. If the woman reports that more than one person conducted the first postpartum checkup, circle the code for the person who checked on her health that appears highest in the list.

Finally, Q. 445 is asked of women who delivered in a health facility but who did not receive a postpartum checkup from a health professional before discharge. It seeks information on whether the woman had a postpartum checkup from any health personnel or an anganwadi worker or traditional birth attendant (TBA) after she was discharged from the health facility. You should mark YES to this question only if the checkup was related to her recent delivery and not

if the care was for some other problem she had. If YES, the respondent is skipped to Q. 449 to obtain more information on the checkup. If NO, skip to Q. 459.

Qs. 446-447: DELIVERING IN A PLACE OTHER THAN A HEALTH FACILITY

Qs. 446 and 447 are asked of all women who delivered outside a health facility. For Q. 446, if the respondent reports more than one reason for not giving birth in a health facility, record all the reasons she mentions. Q. 447 is asked to ascertain details about the procedure followed during the woman's delivery. In part 'a' of this question, a disposable delivery kit (DDK) refers to a kit which contains at least a small bar of soap for washing hands, a plastic sheet, a clean string for tying the umbilical cord, and a new razor blade for cutting the cord. For part 'b', find out if the baby was immediately wiped dry and wrapped without being bathed. If the child was bathed before being dried and wrapped, circle '2' for NO. For part 'c', we want to know whether a clean razor blade was used to cut the umbilical cord. Use of a clean blade can prevent the transmission of tetanus-causing spores and other pathogenic organisms via the umbilicus to the infant.

Qs. 448: POSTPARTUM CHECKUP FOR MOTHERS NOT DELIVERING IN HEALTH FACILITY

Like Q. 447, Q. 448 is asked from women who delivered outside a health facility. The question asks if the woman was seen by any health personnel, anganwadi worker, or traditional birth attendant for a check of her health. Record NO if the woman saw a provider but the care was unrelated to the delivery.

Q. 449: POSTPARTUM CHECKUP FOR MOTHERS

This question is asked of two groups of women who received a check on their health: (1) mothers who did not deliver in a health facility and (2) mothers who delivered in a health facility but did not receive a health check before leaving the facility. For those had a health check, Q. 449 asks how soon after delivery the first check took place. Q. 449 is similar to Q. 443.

Qs. 450-451: PERSON CONDUCTING FIRST HEALTH CHECK AND PLACE WHERE CHECK TOOK PLACE

These questions are asked of two groups of women: (1) mothers who did not deliver in a health facility and (2) mothers who delivered in a health facility but did not have a postpartum checkup before being discharged.

Q. 450 is similar to Q. 444. Q. 451 seeks information on the place where the first postpartum checkup took place. Such care is usually given at a health care facility but is sometimes provided in the home. If outside the home, ask the respondent whether the place is in the public (run by the government) or private sector. If the place is run by a nongovernmental organization or trust, circle code '31.' Only if the respondent does not know whether the place is run by the government or is private, write the name of the facility in the space provided, and inform your supervisor after you complete the interview.

Qs. 453-458: CHECKUP OF CHILDREN

Q. 453 is directed to women who delivered outside a health facility and asks about whether the child received a checkup from any health personnel or traditional birth attendant at the time the woman received her first postpartum checkup. If the respondent answers NO to Q. 453, skip to Q. 455 and ask whether any health personnel or traditional birth attendant checked on his/her health *in the two months after the child was born*. If the respondent answers YES to Q. 453, ask Q. 454 to find out if this was the first time that the health of the child was checked. If the

respondent answers NO to Q. 454, ask Qs. 456-458, which are similar to earlier questions asked about the first health check for women.

Q. 459: POSTPARTUM COMPLICATIONS

Information is sought on two types of complications which can occur during the postpartum period, namely massive vaginal bleeding and very high fever. Massive vaginal bleeding is bleeding much more than what is considered normal. If the woman reports that she had very high fever, circle '1' irrespective of the cause of the fever so long as it was within the first two months postpartum.

Qs. 460-462: POSTPARTUM AMENORRHEA

After a woman has given birth, there is a length of time when she is unlikely to become pregnant again because she does not have her monthly menstrual periods (postpartum amenorrhea). Note that Q. 460 is asked about the last birth while Q. 461 is asked for all other births.

In Q. 462, record the woman's answer in completed months. Remember to put a zero in the first box for a period of less than ten months.

Qs. 463-465: POSTPARTUM ABSTINENCE

Couples may observe a certain length of time after the birth of a child before resuming sexual relations (postpartum abstinence). Qs. 464-465 are asked to determine for how long the woman abstained from intercourse after the birth of her child. Again, record the woman's answer in completed months. The filter in the column for the last birth (Q. 463) must be completed before asking Q. 464 so you will not ask pregnant woman a redundant question about the resumption of sexual activity.

Q. 466: CHILD EVER BREASTFED

Breastfeeding is important for reducing fertility and protecting child health. For this question, it does not matter how long the respondent breastfed the child, only whether or not she ever gave the child the breast, even if the baby died very young.

Q. 467: WHEN BREASTFEEDING BEGAN

If the mother reports that the baby was put to the breast immediately or within half an hour after birth, circle '000.' Otherwise, record the time in completed hours or days.

EXAMPLES: If the mother began breastfeeding within 24 hours of the birth (but not within the first half hour after birth), circle '1' and record the number of hours that passed before the baby was put to the breast. If the mother began breastfeeding 45 minutes after the child was born, circle '1' and record '00' hours.

If she began breastfeeding 24 hours or more after the birth, circle '2' and record the number of days.

Always record the response in completed number of units.

EXAMPLE: If the baby was first breastfed 30 hours after delivery, circle '2' and record 01 days.

Qs. 468-469: PRELACTEAL FEEDING

These questions are asked to find out whether the baby was given any fluid other than breast milk before the mother's breast milk began to flow regularly (in the first three days after birth). In

Q. 469, circle all applicable codes.

Q. 470-471: STILL BREASTFEEDING

Q. 471 is only asked if the child is still alive (Q. 470). Note that for Q. 471, it does not matter whether she is giving the child other liquids or foods as well as breastfeeding; we are interested in knowing whether the child is being breastfed at all.

Q. 472: NUMBER OF MONTHS BREASTFED

This question is for women who are no longer breastfeeding the child in question. It is important to try to get the most accurate information possible. If the respondent says she cannot remember how long she breastfed a child, urge her to think about it for a while or ask her whether she remembers how old the child was when she completely stopped breastfeeding him or her. If she gives an approximate answer, such as "about one year," establish whether it was exactly one year or how much more or less.

Record the number of months until she completely stopped breastfeeding the child. It does not matter whether she was giving the child other liquids or foods as well as breastfeeding; we are interested in how many months she was breastfeeding at all.

Q. 473: FILTER FOR LIVING CHILD

Check Q. 404. If the child is alive, mark the box on the left and skip to Q. 476. If the child is dead, mark the box on the right and then do one of two things: 1) if there is another birth in the table (another child born in January 2001 or later), go back to Q. 405 and ask the questions for the next child, or 2) if there are no more births (you have obtained information for all the children born in January 2001 or later), you will go to Q. 478.

Qs. 474-475: NIGHTTIME AND DAYTIME BREASTFEEDING

These questions are only asked for a last-born child who is still being breastfed. Find out in Q. 474 how many times the woman put her child to the breast last night, that is, between sunset yesterday and sunrise today (the day of the interview). If she feeds the child on demand or she cannot remember how many times she breastfed last night, ask her to provide an estimate. In Q. 475, we want to find out how many times she put her child to the breast yesterday during the daytime from sunrise to sunset. Again, if she is not certain, ask her to estimate. Put a zero in the first box if she breastfed the child less than 10 times.

Q. 476: BOTTLE WITH NIPPLE

Since use of bottles with nipples can be unsanitary and can indicate early or inappropriate weaning, this question seeks to measure bottle-feeding practices. It does not matter what was fed to the child in the bottle with a nipple; it could be milk, tea, juice or any other liquid. What is important is whether the child was fed anything from a bottle with a nipple.

Q. 477: SKIP TO NEXT CHILD

At this point, go back to Q. 405 to ask the questions for the child in the next column. If you have finished these questions for all births in January 2001 or later, proceed to Q. 478.

Qs. 478-480: LIQUIDS AND FOODS GIVEN YESTERDAY

The purpose of these questions is to obtain a better picture of the variety of the child's diet. The questions are intended to be asked about the youngest child living with the respondent who was

born since January 2003 (NOT 2001, which was the cutoff for the previous questions).

Q. 478 is a filter. Check Qs. 215 and 218 and complete Q. 478 as appropriate. If the woman has at least one child born in 2003 or later who lives with her, be sure to write the name of that child on the blank line.

In Q. 479, we ask the mother about any liquids her child consumed yesterday during the day or at night. In Q. 480, we ask about foods that the child may have consumed during that same period. In these questions, foods are categorized based on their most important nutritional contribution to the diet. For example:

480c: Foods made from grains (i.e. oats, maize, barley, wheat, sorghum, millet, etc.) are good sources of calories, niacin, and B vitamins; examples of such foods are roti, chapati, noodles, biscuits, idli, pasta, and rice.

480d and g: Foods that have a high vitamin A content include red sweet potatoes, carrots, pumpkins, red squash, and ripe mangoes or papayas.

480e: Foods made from roots, such as yams, plantains, cassava, and white potatoes are a good source of energy and are often used as a staple food.

480f: Dark green leafy vegetables are a good source of vitamins and supplementary minerals.

480h: Other fruits and vegetables, such as oranges, bananas, apples, avocados, and tomatoes, provide additional vitamins and minerals.

480i-m: Eggs, fish, poultry, meat, and dairy products are primarily sources of animal protein and iron.

480n-o: Foods made of lentils, beans, pulses, and peanuts (groundnuts) are good sources of vegetable protein but also provide micronutrients.

480p: In addition to breast milk and other milks, infants may secure protein from cheese, yogurt and other milk products.

In asking both questions, begin by reading the introductory portion of the question slowly, emphasizing that the question concerns what the child drank or ate **yesterday** during both the day and night. Then ask about EACH of the items in the order they appear in the question. Be careful to record the response ('YES,' 'NO' OR 'DON'T KNOW') for an item before asking about the next item. For categories that have more than one item of food or drink, circle '1' for 'YES' if any item in that category was given.

As you are asking about the initial items, the mother may tell you that the child was given only one or two food items yesterday and she may name those items (e.g., breast milk only or breast milk and porridge). In this case, check to be sure that the child was not given anything else (e.g., by asking "Did (NAME) drink any other liquid at all?" and "Was (NAME) given any other solid or semi-solid food"). If the mother confirms in response to these questions that the child was not given any other liquid or food, mark YES for those items the mother reported she gave the child and NO for all other items in the list. Also, be sure to ask separately whether the child was given any food made with oil, fat, or butter if the mother has not already provided that information.

Sometimes the mother may tell you that the child was given "vegetable soup" or "meat stew". Since these typically include a variety of food types, it is important that you still ask individually about the specific food items listed in Qs. 479 and 480.

If the mother was not with the child on the day before you conduct the interview, she may not be able to answer these questions. If this situation occurs, ask if you can talk to the person who was responsible for the child's care while the mother was away about what the child ate. It is also possible that the mother will consult other household members about what the child ate even if she was at home since the mother may not be the only one who fed the child yesterday

Q. 481: FILTER FOR WHETHER CHILD ATE ANY FOOD

This filter checks Q. 480 to determine if at least one 'YES' is circled, i.e., the child ate some food during the day or night before the interview. If so, continue with Q. 482. If not a single 'YES' is circled in Q. 480, skip to Section 5.

Q. 482: NUMBER OF TIMES CHILD WAS GIVEN FOODS OTHER THAN LIQUIDS

In this question, we try to find out the total number of times that the child was given non-liquid foods during the day or night before the interview. Count regular meals and snacks given to the child between regular meals. If the number is 7 or more, record '7' in the box.

Example: The respondent reports her child was breastfed 8 times the previous day and fed porridge in the morning and evening. The child also ate a mashed banana during the afternoon. Record '3' in Q. 482 since the child ate solid/semisolid foods 3 times the day before the interview.

H. SECTION 5: IMMUNIZATION, HEALTH, AND WOMEN'S NUTRITION

Qs. 501-503: COLUMN HEADINGS

Complete the column headings, following the same procedure as you did for Section 4. All the same children listed in Section 4 will also be listed in Section 5. There is an important difference between Sections 4 and 5. Section 4 obtains information for both living and dead children born in January 2001 or later, while Section 5 obtains information only for living children born in January 2001 or later. However, you need to complete the column headings for both living and dead children in Section 5 because all women will be asked a series of health-related questions at the end of this section.

Check Qs. 212 and 216 and fill in the children's Line Numbers in Q. 502, and the children's names and survival status in Q. 503 at the top of this page. Then write the children's names at the top of all the pages with birth columns (through Q. 552). Make sure to start with the last birth, then the next-to-last birth, etc. If there are more than three births in January 2001 or later, use the second column of a continuation questionnaire labeled 'CONTINUATION'. Make sure to record information on the cover sheet of the continuation questionnaire.

After completing Q. 503 for all births since January 2001, start with the LAST BIRTH in the first column and do one of three things: 1) if the child is alive, ask Q. 504; 2) if the child is dead, go to the next column for the birth recorded there; or 3) if the child is dead and there are no more births, go to Q. 553.

Qs. 504-506: VITAMIN A

Show the woman the vitamin A samples and ask her if the child has ever received a vitamin A dose. It does not have to be exactly like one of the vitamin A samples that you show if she is sure that the child did receive a vitamin A dose. If the child never received a vitamin A dose, or if the mother does not know, skip to Q. 507. For children who have received a vitamin A dose, you

will ask Qs. 505 and 506. For Q. 505, enter the total number of times the child received a dose in the box. If the child received 7 or more doses, enter 7.

For Q. 506, record the number of months that have passed since the child took the last dose of vitamin A. Put a zero in the first box if the number of months is less than 10.

Q. 507: IRON DEFICIENCY

Iron supplementation is believed to be one of the most effective methods of alleviating anaemia. Iron supplements for infants and young children are given in the form of tablets, pills, or liquids (syrups or drops). Iron is also made available from a packet containing tiny iron particles that are sprinkled on the food that is served to the child. For Q. 507, show the woman the iron samples and ask if the child is *currently* taking iron supplementation.

Q. 508: INTESTINAL WORMS

De-worming, that is, getting rid of intestinal worms, is possible with cheap and effective drugs that are safe for pre-school children. Question 508 asks if the child took any drug for de-worming in the past six months. If the child took a drug for worms more than 6 months ago, but not during the six months before the survey, circle code '2' for NO.

Q. 509: VACCINATION CARD

You may have already seen certain documents (births certificates or vaccination cards) for her young children when recording their ages. If you have already seen a vaccination card for the child, circle '1' for YES, SEEN.

If you have not seen the child[ren]'s vaccination card(s), ask the respondent to look for any vaccination cards that she has for all eligible children (children born in January 2001 or later who are still alive). In some cases, the respondent may hesitate to take time to look for the vaccination card(s), thinking that you are in a hurry. Since it is critical to obtain written documentation of the child's immunization history, be patient if the respondent needs to search for the card. Assure the respondent that you are willing to wait.

If the respondent shows you the vaccination card, record YES, SEEN. If the respondent says the child has a vaccination card, but she is unable to show it to you because she has lost it, someone else has it, or it is not accessible to her during the interview, record YES, NOT SEEN for that child. If the respondent says she does not have a card for her child, record NO CARD. Each response to this question has a different skip instruction, so be careful to follow the correct skip pattern.

Q. 510: EVER HAD VACCINATION CARD

If, in Q. 508, the woman tells you she does not have a card for her child, ask her in this question whether she ever had a card for that child. It is possible that she did have a card once, but no longer has it. Circle the appropriate code and skip to Q. 514.

Q. 511: RECORDING VACCINATIONS

If you have the vaccination card for the child, fill in the responses to Q. 511, taking the information directly from the vaccination card. When there is more than one eligible child, be certain to match the correct card with the correct child.

Before copying dates from the card to Q. 511, examine the card carefully. The card may list the vaccinations in a different order than the questionnaire. Also Q. 511 requires dates to be recorded with the day first, then the month, and then the year. Check the card carefully to see

which way the dates are written because sometimes the month might come first, followed by the day and year. Be very careful to record dates correctly.

Besides recording vaccination dates on the card, some health facilities may also record the dates (appointments) on which the mother should bring her child for the next immunizations. Be very careful not to record a scheduled appointment date as a vaccination date. It is possible that an appointment date was given, but the child never received the vaccination. Only record dates that vaccinations were actually given, and not dates of appointments. Be patient and read the card thoroughly.

Here are some examples:

Example:

Priya's vaccination card shows the following immunizations:

BCG	May 20 2001
Polio 0	May 20 2001
Polio 1	25 August 2001
Polio 2	October, 2001
Polio 3	Blank
DPT 1	25 August 2001
DPT 2	October, 2001
DPT 3	Blank
Measles	Given, but no date
Vitamin A	Received Oct. 2001

	LAST BIRTH							
	DAY	MONTH		YEAR				
BCG	2	0	0	5	2	0	0	1
POLIO 0	2	0	0	5	2	0	0	1
POLIO 1	2	5	0	8	2	0	0	1
POLIO 2	9	8	1	0	2	0	0	1
POLIO 3								
DPT 1	2	5	0	8	2	0	0	1
DPT 2	9	8	1	0	2	0	0	1
DPT 3								
MEASLES	4	4						
VITAMIN A (FIRST DOSE)	9	8	1	0	2	0	0	1
VITAMIN A								

If the card shows only part of the date, record '98' for DON'T KNOW in the column for which the information is not given (or 9998 if the year is not given).

Example: If the date given was July 2002, you would record '98' for DAY, '07' for MONTH, and '2002' for YEAR.

If the card shows that a vaccination was given, but there is no date shown, record '44' in the DAY column next to the vaccine and leave the month and year blank. However, if a date is given for a DPT vaccination and there is simply a check mark to show that a polio vaccine was also given, record the date of the DPT injection on the polio line since this probably indicates that the vaccinations were given on the same day. Some vaccination cards may have only a single line for DPT1 and POLIO1, DPT2 and POLIO2, etc. If there is a date on one of these lines, record the same date for both the DPT and polio vaccinations.

Q. 512: ALL ROWS FILLED

Check Q. 511 to see whether or not ALL of the rows from BCG to MEASLES are filled. If all these rows are filled, skip to Q. 517. Otherwise, continue with Q. 513.

Q. 513: ANY VACCINES GIVEN BUT NOT RECORDED

Sometimes a child receives a vaccine but no record is made on the vaccination card. After copying the card, ask the respondent whether the child received any of the vaccinations that are

not recorded on the card. This includes vaccinations given in Pulse Polio campaigns.

In some cases the mother may not know which vaccinations are recorded on the card. You may have to tell her what has been recorded, and then ask whether the child received any other ones.

If the child did receive any vaccinations that were not recorded in the card, record YES, then find out which vaccine was given, go back to Q. 511, record '66' in the DAY column next to the vaccine received, and leave the month and year blank. Do this for each of the vaccinations the mother tells you about and then go to Q. 516. Record YES in Q. 513 only if the respondent mentions that the child received any vaccines for BCG, polio, DPT, and measles that are not recorded on the vaccination card.

If the child did not receive any of the vaccinations for which you have not already recorded a date, circle '2' for NO and go to Q. 516.

Q. 514: EVER HAD A VACCINATION (BUT NO VACCINATION CARD SEEN)

You will ask this question only if you did not see a vaccination card for this child. In that case, all of the information about vaccination of the child will be collected from the mother, based on her memory about those vaccinations.

Qs. 515-515G: VACCINATIONS FOR CHILDREN WITH NO CARD

If you did not see a child's vaccination card and the respondent tells you that the child did receive at least one vaccination, you will ask about each of the following four vaccinations the child received: BCG, polio, DPT, and measles.

Read the introductory question (Q. 515) and then ask Qs. 515A-G, following the appropriate skip patterns. Because there are many types of vaccines, we specify how each one is given so the mother will know which vaccine we are asking about. Read the whole sentence before accepting the woman's response.

Notice that there are follow-up questions for the polio and DPT vaccinations. For the polio vaccine, we ask whether the child received it, when the child first received it, and how many times the child received it. For the DPT vaccination, we ask whether the child received the vaccination and how many times.

Q. 517: SOURCE OF VACCINATIONS

For children who have received any vaccinations (either listed on the vaccination card or from the mother's recall), ask the respondent where the child received most of his/her vaccinations. If the child has received only one vaccination, ask where he/she received that vaccination. In either case, ask the respondent whether the place is in the public (run by the government) or private sector. If the place is run by a nongovernmental organization or trust, circle code '21'. Only if the respondent does not know whether the place is run by the government or is private, write the name of the facility in the space provided (if it is a hospital, health centre, or clinic), and inform your supervisor after you complete the interview. If most of the vaccinations were given in Pulse Polio campaigns, circle code '19' for PULSE POLIO CAMPAIGN no matter where the vaccinations were actually given.

Q. 518: DIARRHOEA IN LAST 2 WEEKS

Diarrhoea is a major cause of illness and death among young children in developing countries. If a respondent is not sure what we mean by diarrhoea, tell her it means "more than three runny stools per day." While reading this question, emphasize "in the last two weeks."

Q. 519: WHEN THE DIARRHOEA STARTED

For children who did have diarrhoea any time in the past 2 weeks, we want to know how long ago the diarrhoea started. This could be during the two weeks or before the two weeks. If the mother says that the child has had diarrhoea for three days now, record '03' DAYS after circling '1'. If she says that it started three weeks ago, circle '2' and enter '03' weeks.

Q. 520: BLOODY STOOLS

Record whether there was any blood in the stools. Blood in the stools is a symptom of dysentery, an infection caused by particular bacteria.

Qs. 521-522: DRINKING AND EATING DURING DIARRHOEA

The amount of fluids or food given while a child has diarrhoea may be different from the normal amount. Read the entire question before accepting a response. If a respondent says "less", probe to determine more specifically if it was "much less" than usual or "somewhat less" than usual.

Qs. 523-524: SEEKING ADVICE FOR DIARRHOEA

These questions ask whether advice was sought from someone else on how to treat this episode of diarrhoea, for example, advice from a Primary Health Centre, a traditional healer, or a pharmacy. Record YES in Q. 523 if anyone sought advice or treatment for the child's diarrhoea (not just the mother).

If advice or treatment was sought (Q. 523 is YES), ask Q. 524 and probe for all sources. If advice or treatment was received from more than one source, circle the code for each facility or person contacted.

Qs. 525-526: FIRST PLACE SOUGHT TREATMENT FOR DIARRHOEA

Q. 525 is a filter. If the woman cited more than one source in Q. 524, probe in Q. 526 for the first place where advice/treatment for diarrhoea was sought. Record the letter code from Q. 524 corresponding to the first place advice or treatment was sought.

Q. 527: HOW SOON WAS ADVICE/TREATMENT SOUGHT FOR DIARRHOEA

Women are asked how long (that is, how many days) they waited once the diarrhoea began before seeking advice/treatment for the child's diarrhoea, since prompt treatment is critical. Record '00' if advice was sought the same day the diarrhoea started.

Q. 528: CURRENT STATUS OF DIARRHOEA

This question provides information on the prevalence of diarrhoea at the time of the survey interview.

Q. 529: SPECIAL FLUIDS

Women are asked if they gave fluid made from a packet of oral rehydration salts (ORS) such as [LOCAL NAME FOR ORS PACKET] or gruel to the child when the child was suffering from diarrhoea. Gruel is a thin watery porridge which can be made from rice or any other local grain, tuber or plantain. Read out each item and circle the answer given after each item. Be sure to circle a code for each item. Do not leave either item blank.

Qs. 530-531: TREATMENT OF DIARRHOEA

These questions ask the mother whether the child received any treatment other than those mentioned in Q. 529 for this episode of diarrhoea. If in Q. 529 you learned that the child was given fluid from an ORS packet or gruel, then phrase Q. 530 by saying, “Was anything else given to treat the diarrhoea?” If neither ORS nor gruel was given, ask Q. 530 by saying, “Was anything given to treat the diarrhoea?”

If you learn in Q. 530 that any other treatment was given for the episode of diarrhoea, ask Q. 531 to identify what (else) the mother or anyone other person gave the child to treat the diarrhoea. After recording a treatment, ask the woman whether “anything else” was given, but do so without implying that something else should have been given.

Q. 532: FEVER IN LAST 2 WEEKS

Among other things, fever is a symptom of malaria or pneumonia, which are two of the principal causes of death for young children in India. Record YES only if the fever occurred at any time in the two weeks prior to the date of interview.

Q. 533: COUGH IN LAST 2 WEEKS

Record YES only if the child had an illness with a cough at any time in the two weeks prior to the date of interview.

Q. 534: SHORTNESS OF BREATH

This question is asked only if the child was ill with a cough in the past two weeks. Pneumonia and respiratory infections can be accompanied by short, rapid breathing or difficulty breathing.

Q. 535: DISTINGUISH BETWEEN RESPIRATORY ILLNESS AND AN ORDINARY COLD

The purpose of this question is to better distinguish between respiratory illness, which can be life threatening, and an ordinary blocked or runny nose, which is less serious. With this question we want the respondent to think whether the problem had symptoms that involved the chest, such as pain in the chest or difficulty taking deep breaths. In other words we want to know if the problem had symptoms which were felt in the chest rather than only in the nose or throat.

Q. 537: TIME SINCE FEVER STARTED

Question 537 is asked about children who had either a fever or a cough or both. The question asks when the child’s fever or cough started. Circle code ‘1’ if the fever/cough started less than one week ago and enter the number of days ago in the boxes. Circle code ‘2’ if the fever/cough started more than one week ago and enter the number of weeks ago in the boxes. For children who have had both a fever and a cough in the past two weeks, note how long ago the earlier of the two started. For example, if the fever started six days ago, but the cough started five days ago, enter ‘06’ for DAYS AGO.

Qs. 538-539: DRINKING AND EATING DURING FEVER/COUGH

The amount of fluids or food given while a child has fever/cough may be different from normal. Read the entire question before accepting a response. If a respondent says “less”, probe to determine if it was “much less” than usual or “somewhat less”.

Qs. 540-541: ADVICE OR TREATMENT SOUGHT FOR COUGH AND FEVER

Record YES if anyone sought advice or treatment for the child's fever/cough (not just the mother). If advice or treatment was sought, go on to ask Q. 541. Probe to determine whether more than one person or more than one place was consulted, and record all sources mentioned.

Q. 542-543: FIRST PLACE SOUGHT TREATMENT FOR FEVER/COUGH

Q. 542 is a filter. If a woman gives more than one source in Q. 541, probe in Q. 543 for the first place where advice/treatment for fever/cough was sought.

Q. 544: HOW SOON WAS ADVICE/TREATMENT SOUGHT FOR FEVER/COUGH

Women are asked how long (that is, how many days) they waited before seeking advice/treatment after the fever/cough started, since prompt treatment is critical.

Q. 545: CURRENT STATUS OF FEVER/COUGH

This question provides information on the current prevalence of fever/cough. Record YES if the child is still sick with either a fever or a cough or both.

Qs. 546-547: DRUGS TAKEN FOR THE FEVER/COUGH

Ask the respondent whether the child took any drugs when he/she had the fever and/or cough. If the child did take some drugs for the illness, ask what drugs were taken. Note that more than one drug may have been administered to the child. In Q. 547, mark all the drugs mentioned by the respondent.

If the woman does not know the name of a drug, ask her to show you the drug. Record "UNKNOWN DRUG" only if she cannot show you the drug or you cannot determine the type of drug given to the child with fever/cough. Sometimes the mother does not know the name of the drug but does know whether it was an antimalarial drug (code 'F') or antibiotic drug (code 'G'). Record code 'E' for OTHER ANTIMALARIAL drug only if the mother knows that the drug was an antimalarial drug and she knows the name of the drug, but it is not chloroquine, primaquine, SP, or a combination with artemisinin (sometimes called ACT).

Q. 549: PRESENCE OF DRUG AT HOME

For each antimalarial or antibiotic drug mentioned in Q. 547, ask if the respondent had the drug (by name) in the house at the time the child became ill and circled those drugs that she already had at home. You do not need to do this for any other drug mentioned by the respondent. If she did not have any of the medications used for the child's illness at home when the child became ill, circle code 'Y' (NONE OF THEM AT HOME).

Q. 551: WHEN AN ANTIMALARIAL DRUG WAS FIRST GIVEN

This question is asked only if the child was given any antimalarial drug. It is assumed that the child had a fever if an antimalarial drug was given. Find out how long after the fever started the child *first* took any of the antimalarial drugs. For example, if the child took chloroquine the day after the fever started and then took a combination with artemisinin the next day, circle '2' for NEXT DAY.

Q. 552: INSTRUCTION TO ASK QUESTIONS 503-551 FOR NEXT CHILD

At this point, go back to Q. 503 and ask the series of questions for the birth in the next column. If there are no other births, proceed with Q. 553.

Q. 553: FILTER FOR NUMBER OF CHILDREN BORN IN 2001 OR LATER

Check Qs. 215 and 218 to find out how many children the respondent has who were born in 2001 or later and who are living with her. If there are no children born during this period who are living with the respondent, mark the box on the right and go to Q. 556. If she has one or more children born during this period who are living with her, mark the box on the left and ask Q. 554.

Q. 554: DISPOSAL OF STOOLS

Correct disposal of stools is linked with lower risks of spreading diseases. Mothers are asked where they disposed of their youngest child's stools the last time the child passed stools. If the child was wearing a diaper, record what was done to the stools in the diaper.

Q. 555: FILTER FOR HAVING RECEIVED ORS PACKETS

Check Q. 529(a) and record whether *any child* received an ORS packet solution to treat diarrhoea.

Q. 556: KNOWLEDGE OF ORS PACKETS

This question will be asked to determine whether respondents have heard of a special ORS packet to treat diarrhoea. It is asked of all women interviewed with the exception of those with children born in 2001 or later who mentioned giving any of those children an ORS packet solution to treat a recent case of diarrhoea. Be sure to use any local name that is used for these packets.

Q. 557: PROBLEM IN GETTING MEDICAL TREATMENT

In this question, we are trying to understand the hurdles women generally face in accessing health care for themselves. Read the question slowly, emphasizing the choices (big problem, small problem, or no problem). Make sure that the woman understands that this question refers to medical care for the respondent herself, since previous questions asked about treatment for her children.

Read out each item and circle the answer given before asking about the next item. Do not leave any blank. The phrase "When you are sick" in this question does not refer to any one specific episode of illness but to the typical scenario given the respondent's present circumstances. Consequently, if a woman says she cannot answer the question because she has not been sick, you must help her understand the question relates to the type of problems she might experience in accessing health care if she were to be sick.

"Getting permission to go" means that someone's permission is necessary for her to go and get the care. It does not matter who this person is (father, husband, mother-in-law). Circle '3' for NO PROBLEM in the case where she does not need anyone's permission, as well as the case where she says, for example, she needs her mother-in-law's permission but that this is never a problem. "Getting money needed for treatment" includes money for actual treatment and/or for medicines. The word transport in the item "having to take transport" can be any transport that the woman would typically have to take if she could not walk to the place where she would get the care. "Finding someone to go with you" refers to a situation where the woman will not go to get treatment alone because she herself does not want to go alone or she would not be allowed to go alone and finding someone to go with her can be a problem.

Q. 558: WOMEN'S NUTRITION

For this question we are interested in the knowing how often the respondent consumes foods from several different categories. Record a response for each category. The code DAILY includes women who eat a certain food at least 5-6 times a week. If the woman says that she

eats a particular food, but she eats it less frequently than once a week, circle '3' for OCCASIONALLY. Circle code '4' only if the woman absolutely never eats that category of food. For example, women can be vegetarian and never eat chicken or meat.

Q. 559: NUMBER OF INJECTIONS DURING THE 12 MONTHS PRIOR TO THE DAY OF THE INTERVIEW

Ask the respondent if she has had an injection for any reason during the 12 months prior to the day of the interview. If YES, ask the question below to find out how many injections she has had during that period. If the number of injections is higher than '90' or she had daily injections for three months or more, record '90'. In case the response is not numeric, probe to get an estimate. Follow the skip pattern correctly.

Q. 560: NUMBER OF INJECTIONS GIVEN BY MEDICAL PERSONNEL

Check Q. 559 to see how many injections the respondent has had in the last 12 months and ask her the appropriate question. Here, we want to find out how many of the injections the woman had were given by medical personnel (doctor, nurse, pharmacist, dentist or any other health worker). If the number of these injections is '90' or higher, or she had daily injections given by medical personnel for three months or more, record '90'. In case the response is not numeric, probe to get an estimate. If none of the injections the respondent received were administered by health personnel, circle '00' for NONE.

Q. 561: PLACE WHERE THE LAST INJECTION WAS GIVEN

Ask the respondent the place where she had the injection the last time. When choosing a code, you need to know whether the place is in the public sector (run by the government) or in the private sector. If the place is run by a nongovernmental organization or trust, circle code '21.' If the respondent does not know whether the place where the last injection was given is public or private, ask the respondent the name of the place, record it in the space provided, and inform your supervisor after you complete the interview.

Qs. 562-563: SYRINGE AND NEEDLE USED

For Q. 562, ask the woman if the last time she had an injection, the person used a syringe and needle from a new, unopened package. For women who say that the syringe and needle did not come from a new, unopened package or who do not know whether the syringe and needle came from an unopened packet, ask Q. 563. This question asks the respondent if she knows whether the needle was sterilized.

Q. 564: BLOOD TRANSFUSION

Ask the woman if she has ever received a blood transfusion. The blood in a transfusion would normally be blood from another person. Sometimes a person scheduled to have an operation will have some of their own blood stored in case they need it during the operation. If their own blood or someone else's blood is used for a transfusion, circle code '1'.

Qs. 565-566: SMOKING CIGARETTES OR BIDIS

Studies have shown that smoking can increase the risks for lung, larynx, pancreatic, and bladder cancers, as well as chronic lung conditions and heart disease for both men and women. For women, there are additional risks such as osteoporosis, cervical cancer, and early menopause. Smoking during pregnancy can lead to complications that increase the risk of growth retardation and may cause late fetal deaths and possibly neonatal death. The risk level of these health hazards is directly associated with the amount of cigarettes and tobacco

consumed.

In Q. 565, ask the respondent whether she currently smokes cigarettes or bidis. This does not include chewing tobacco or any other type of tobacco. In Q. 566, record the number of cigarettes or bidis she smoked in the 24 hours prior to the interview. Remember to fill in the first box with '0' for numbers less than 10. If she did not smoke any cigarettes or bidis in the last 24 hours, record '00'.

Qs. 567-568: OTHER FORMS OF TOBACCO

These two questions are designed to find out about the use of tobacco in forms other than as cigarettes or bidis. Q. 568 is a multiple response question, so be sure to record all other types of tobacco that she smokes or uses. If a person says they smoke the 'hukka', code it as OTHER and specify 'Hukka'.

Qs. 569-570: DRINKING ALCOHOL

In Q. 569, ask the respondent whether she currently drinks alcohol. In Q. 570, record the frequency of the respondent's drinking alcohol. If a person says that they drink 'Tadi', circle '1' for YES.

Qs. 571-574: TUBERCULOSIS

These questions obtain information on women's knowledge of tuberculosis (TB) and whether persons who have the illness are stigmatized. Be sure to probe in Q. 572 to find out all the transmission routes a woman may know. Be careful not to suggest responses when probing.

Q. 575: OTHER HEALTH PROBLEMS

This question asks whether the respondent has diabetes, asthma, or any thyroid disorders including goiter. Be careful to record answers for each of the three questions before moving on to Q. 576. Additional information about these conditions is provided below:

Asthma is a chronic lung condition involving repeated attacks of breathing difficulty. Symptoms include coughing, wheezing, shortness of breath, and chest tightness. The symptoms of asthma are sometimes confused with those associated with TB.

Diabetes is a chronic disease caused by a malfunction of the pancreas resulting in increased concentrations of glucose in the blood. The condition can damage many of the body's systems, in particular the blood vessels and nerves. Symptoms include excessive secretion of urine, thirst, weight loss, and tiredness.

The main characteristic of goiter is swelling in or disfigurement of the neck. The swollen area is usually painless. The condition is often brought on by a lack of iodine in the diet.

I. SECTION 5A: UTILIZATION OF ICDS SERVICES

The anganwadi or ICDS centres have been set up by the government to help meet the needs of early childhood development and address the interrelated needs of adolescent girls and pregnant and breastfeeding mothers. The services provided for include services related to health (immunizations for children, health check-ups, referral services, and treatment of minor illnesses), nutrition (supplementary feeding, growth monitoring, and nutrition and health education), and early childhood care and preschool education. Accordingly, in this section information is sought on the utilization of these services by respondents for each of their children who are currently 0-6 years old and during each of the associated pregnancies. This

section is skipped if the woman has not had any live births in 2000 or later (see Q. 576).

Qs. 577-579: TABLE HEADING

Complete the table heading for all children born in 2000 or later, following the same procedure as you did for Section 5. Check Qs. 212 and 216 and fill in the Line Number (Q. 578), child's name, and survival status (Q. 579) at the top of this page. Fill in the child's name at the top of the next page as well. Make sure to start with the last birth, then the next to last, etc., in the same order as the children are listed in Section 5. However, note that children born in 2000 are also included in this section, whereas they were not included in Sections 4 and 5.

After completing Q. 579 for all births in 2000 or later, start with the LAST BIRTH in the first column and do one of two things: 1) if the child is alive, ask Q. 580; 2) if the child is dead, go to Q. 587.

Q. 580: CHILD'S BENEFITS/SERVICES FROM THE ANGANWADI OR ICDS CENTRE

This question asks whether the child has received any benefits from the anganwadi or ICDS centre in the last 12 months, such as supplementary food, growth monitoring, immunizations, health check-ups, or education. If the child received any benefits (YES), continue with Q. 581. If the child has not received any benefits at all, skip to Q. 587.

Q. 581: FOOD FROM THE ANGANWADI CENTRE

We are interested in whether the child has received any food from the anganwadi centre in the last 12 months and if so, how often the food was received. Often children receive food when they attend preschool education at the centre. If the mother says that the child receives the food when he/she goes to the centre for pre-school, ask her how often that is. If the anganwadi provides take home supplies of food meant for daily consumption at weekly or monthly intervals, circle the code for 'ALMOST DAILY, code '1'.

Qs. 582-583: HEALTH CHECK-UPS AND IMMUNIZATIONS THROUGH THE ANGANWADI CENTRE

Q. 582 asks how often the child had health check-ups at the anganwadi centre in the last 12 months. In Q. 583, we are interested in whether the child has received any immunizations through the anganwadi centre in the last 12 months. That may include immunizations given at the anganwadi centre or arranged by the anganwadi worker at another location.

Q. 584: EARLY CHILDHOOD CARE OR PRESCHOOL AT THE ANGANWADI CENTRE

Ask the respondent how often the child went to early childhood care or preschool at the anganwadi centre in the last 12 months. Note that the codes for this question are different from the other questions in this series. Circle code '1' for REGULARLY, code '2' for OCCASIONALLY, and code '3' for NOT AT ALL.

Qs. 585-586: GROWTH MONITORING BY THE ANGANWADI CENTRE

Q. 585 asks how often the child was weighed by the anganwadi centre in the last 12 months. For children who were weighed by the anganwadi centre, ask Q. 586. This question asks whether the respondent ever received counseling from the anganwadi/ICDS worker or ANM after the child was weighed. Such counseling should especially be provided if the child is underweight.

Qs. 587-588: BENEFITS/SERVICES FROM THE ANGANWADI OR ICDS CENTRE WHEN

PREGNANT

Q. 587 asks whether the respondent received any benefits from the anganwadi centre when she was pregnant with this child. If she received any benefits (YES), continue with Q. 588. If she did not receive any benefits at all, skip to Q. 589.

Q. 588 asks the woman if she received supplementary food, health check-ups, or health and nutrition education from the anganwadi centre when she was pregnant with this child. Be careful to record her responses to each of the three questions.

Qs. 589-590: BENEFITS/SERVICES FROM THE ANGANWADI OR ICDS CENTRE WHEN BREASTFEEDING

Q. 589 asks whether the respondent received any benefits from the anganwadi centre when she was breastfeeding this child. If she received any benefits (YES), continue with Q. 590. If she did not receive any benefits at all, skip to Q. 591. If she has already told you in Q. 466 that she never breastfed the child, circle code '3' in Q. 589 and skip to Q. 591.

Q. 590 asks the woman if she received supplementary food, health check-ups, or health and nutrition education from the anganwadi centre when she was breastfeeding this child. Be careful to record her responses to each of the three questions.

Q. 591: INSTRUCTION TO ASK QUESTIONS 579-590 FOR NEXT CHILD

At this point, go back to Q. 579 for the birth in the next column and follow the skip instruction. If there are no other births, proceed to Section 6.

J. SECTION 6: SEXUAL LIFE

Q. 601: FILTER FOR THOSE WHO HAVE HAD SEXUAL INTERCOURSE

Check Qs. 316 and 317. The purpose of this filter is to ensure that only those women who have had sexual intercourse are asked the questions in Section 6 about their sexual experience. If the respondent has had sexual intercourse, make sure you read the statement below the filter before moving on to Q. 602, which is also a filter.

Q. 602: FILTER FOR WOMEN WHO ARE AGE 15-24

Check Q. 105. If the respondent is 15-24 years old, mark the box on the left and proceed with the next question. If the respondent is age 25-49, mark the box on the right and skip to Q. 606.

Qs. 603-605: QUESTIONS RELATING TO FIRST SEXUAL INTERCOURSE FOR YOUTH

The objective of these questions is to find out some information for women age 15-24 on the first time they had sex.

Qs. 603-604 are used to obtain information on the extent of the age gap between young women and their first sexual partner. Note that Q. 603 is concerned with the partner's age at the time the couple first had intercourse and not his age at the time of the NFHS-3 interview. Record his age in completed years. If the respondent does not know how old her first partner was when they first had sex, then you will ask Q. 604 to estimate his age. Note that this partner need not have been the respondent's husband.

Q. 605 is of interest because if used consistently and correctly, condoms can reduce the risk of transmission of HIV and other sexually transmitted infections, as well as the risk of pregnancy.

Q. 606: TIMING OF LAST SEXUAL INTERCOURSE

Q. 606 applies to the respondent's last, or most recent, sexual intercourse. Fill in the respondent's answer in the space according to the units that she uses. The YEARS AGO row should be used only if the last intercourse was at least one year ago. In other words, there should never be a response 00 YEARS. If the last time she had sexual intercourse was 12 or more months ago, then the answer must be recorded in YEARS AGO. In other words, any woman who has not had sexual intercourse within the last 12 months will have her answer recorded in YEARS AGO, and then you will skip to Q. 617.

Example(s): if she says "three weeks ago," circle '2' and write '03' in the boxes next to WEEKS AGO. If she says "four days ago," circle '1' and write '04' next to DAYS AGO. If she had sexual intercourse the same day that you are conducting the interview, circle '1' and write '00'.

If the respondent appears to be rounding off her answer, probe for an exact answer. For example, if she says "about a week ago", ask "Do you remember which day? Was it before or after the weekend?"

If the respondent has not yet resumed intercourse since she had her last child, check Q. 215 for the month and year of birth of her last child, and ask how long before the birth of that child she had sex the last time.

If the respondent had sex within the past year, skip Q. 607 and continue with Q. 608. If the last time she had sex was 12 months or longer ago, skip to Q. 617.

Qs. 607-615: GENERAL INSTRUCTIONS

Where appropriate, these questions will be asked in turn about the respondent's two most recent sexual partners in the 12 months before the survey interview. Complete Qs. 608-615 for the most recent partner before asking questions 607-614 for the second-to-last partner.

Q. 607: LAST TIME HAD SEXUAL INTERCOURSE

Q. 607 is not asked for the most recent time she had sexual intercourse because we already know that information from Q. 606. For the second-to-last sexual partner in the last 12 months, ask when was the last time she had sexual intercourse with that partner. Note that the answer can never be 12 or more months ago since we are only asking about someone she had sexual intercourse with at least once in the last 12 months.

Q. 608: CONDOM USED AT LAST INTERCOURSE

When asking about the last sexual partner, ask the question as follows: "The last time you had sexual intercourse, was a condom used". When asking about the second-to-last sexual partner, ask the question like this: "The last time you had sexual intercourse with this other person, was a condom used". If either a male condom or a female condom was used, circle code '1'.

Q. 609: USE OF A CONDOM AT EACH SEXUAL INTERCOURSE IN THE LAST 12 MONTHS

If a condom was used the last time she had sexual intercourse with a particular partner, ask the respondent whether a condom was used every time she had sexual intercourse with that partner in the last 12 months. If she had sexual intercourse with that partner only once and a condom was used at that time, circle '1' for YES.

Qs. 610-611: RELATIONSHIP WITH LAST SEX PARTNER

In these questions, we want to know the relationship of the respondent with the person she had sex with, and the duration of the sexual relationship. If the man is her husband (code '1') or live-in partner (code '2'), skip to Q. 615. If the respondent is a sex worker and her partner is one of her clients, circle code '06'. Note that the response categories are stated in terms of the person's relationship to her.

For recording the duration of the sexual relationship in Q. 611, first circle the code according to the unit the respondent used, and then fill in the answer in the two boxes provided. If the duration is less than 10, write '0' in the first of the two boxes. If she only had sexual intercourse with the person once, record '01' DAYS.

Qs. 612-614: PARTNER'S AGE FOR RESPONDENTS 15-24 YEARS OLD

Q. 612 is used to identify respondents 15-24 years old who are to be asked questions relating to their partner's age. Follow the instructions for Qs. 603 and 604 in asking and recording the responses to Qs. 613 and 614. These questions, however, refer to the current age of the sexual partner, not his age at the time they first had sex. If the respondent mentions that her last partner is the same as her first ever partner on whom she has already reported in Q. 603 then ask her what the partner's age must be now; if she did not know the age in Q. 603 and also does not know the current age, copy the answer she gave in Q. 604 without asking Q. 614.

Q. 615: SEX WITH ANYONE ELSE

This question finds out if the respondent had sex with anyone other than her most recent sexual partner in the past 12 months. Be sure to emphasize the time reference in the question. If she has not had sexual intercourse with anyone else in the last 12 months, then skip to Q. 617.

If the respondent indicates that she had sexual intercourse with a person other than her last partner, ask Qs. 607-614 for that other person and record her responses in the second column in the table.

Qs. 616-617: TOTAL NUMBER OF SEXUAL PARTNERS

Q. 616 asks about the number of different persons the respondent has had sex with in the last 12 months, including persons she already mentioned. Since she is asked this question only if she has had sexual intercourse with at least two persons in the last 12 months, the answer should never be '00' or '01'.

Q. 617 is for all women who have ever had sex and asks about their total lifetime partners. For this question, the answer cannot be '00' but it can be '01' or more.

Qs. 618-619: KNOWLEDGE OF SOURCE FOR CONDOMS

Question 618 asks about the respondent's knowledge of a source for condoms. You will be asking this question of both women who have used condoms and women who have not used condoms. If a respondent insists she has never used condoms and therefore cannot answer this question, explain that we simply want to know whether she is aware of a source for condoms. For example, if someone asked her for advice on where to obtain condoms, could she tell them where to go.

For Q. 619, when choosing a code, you need to know whether the place is in the public (run by the government) or private sector. If the respondent does not know whether the place is

governmental or private, record the name of the place or places and inform your supervisor after you complete the interview.

If the woman tells you that a person can get condoms from a doctor, ask her where the doctor is located. If she replies that the doctor is located in a hospital, ask her whether it is run by the government or is privately owned.

If she mentions more than one place where a person can get condoms, record all her answers since this is a multiple-response question.

Q. 620: ABILITY TO GET CONDOMS

We want to know whether the respondent thinks she could get a condom herself if she wanted to. The ability of a woman to get a condom can be viewed as a measure of her independence.

K. SECTION 7: FERTILITY PREFERENCES

This section gathers information on desires for additional children, preferred birth intervals, attitudes toward family size, intended future use of contraception, and exposure to family planning messages.

Q. 703: PREFERENCE FOR ADDITIONAL CHILDREN

This question is a combination of a filter and a question. First, check Q. 227 to see whether the respondent is pregnant and mark the appropriate box. If she is not pregnant (or is unsure whether or not she is pregnant) and she has no living children (check Q. 216), ask the question on the left as follows: "Now I have some questions about the future. Would you like to have a child or would you prefer not to have any children?" If she is not pregnant (or is unsure whether or not she is pregnant) and she has one or more living children, you will have to word the question differently saying, "Would you like to have another child or would you prefer not to have any more children?" If she answers "It's up to God", ask what her own preference would be if she had a choice.

If the respondent is currently pregnant, mark the box labeled PREGNANT and ask the question under that box: "Now I have some questions about the future. After the child you are expecting now. . ." Note that we want to make sure that a pregnant woman does not think that we are asking whether she wants the child she is pregnant with now.

Q. 704: TIME TO WAIT

Q. 704 is to be asked of all women who say that they want to have another child. Follow the same procedure as in Q. 703 for choosing the appropriate version of the question to ask. Note that the answer can be given in months or years. Circle '1' if the response is in months or '2' if in years, and record the answer in the appropriate boxes. Note that for women who are not pregnant or are unsure if they are pregnant, we are asking how long she would like to wait before the birth of her next child, not how long she would like to wait before getting pregnant. If she says she would like to have a baby right away, record SOON/NOW. If the woman says she cannot get pregnant, circle '994.' If the woman gives a different answer, circle '996' and write her response in the OTHER category.

Q. 705: FILTER FOR CURRENT PREGNANCY

Check Q. 227 and record the answer in the appropriate box.

Q. 706: FILTER FOR USING A METHOD

Check Q. 329. If a YES is recorded in Q. 329, you will mark the box on the right in Q. 706 for CURRENTLY USING. If a NO is recorded, you will mark the box in the middle for NOT CURRENTLY USING. If when checking Q. 329 you see that the question was not asked (she is pregnant, sterilized, or has never used a contraceptive method), you will mark the box on the left in Q. 706 for NOT ASKED.

Q. 707: FILTER FOR TIMING OF NEXT BIRTH

Check the number of months or years recorded in Q. 704 and mark the appropriate box in Q. 707. If Q. 704 was not asked (because she mentioned in Q. 703 that she does not want any more children), mark the box on the left.

Q. 708: REASON FOR NOT USING A METHOD

Check the woman's response in Q. 703. If she says that she wants to have a/another child (code '1' is circled), mark the box on the left and ask the question under that box. If she wants no (more) children (code '2' is circled), mark the box on the right and ask the question under that box.

There are many reasons that a person may not be using contraception, so listen to your respondent carefully. Record as many reasons as the woman mentions. The following are some guides to use in deciding which code(s) to mark:

Code INFREQUENT SEX if the respondent says she is not sexually active enough to be using a method (NOT HAVING SEX would be appropriate if she says she is not sexually active at all).

MENOPAUSAL means she is no longer menstruating and therefore cannot get pregnant, and HYSSTERECTOMY is an operation to remove her uterus. The operation is usually done for health reasons.

Code SUBFECUND/INFECUND if she thinks she cannot get pregnant (not including being menopausal).

If the respondent says she is not using because she has not resumed menstruation since her last birth, record POSTPARTUM AMENORRHEIC.

FATALISTIC means that the respondent feels that pregnancy is predetermined by fate or by God and she has no control over getting pregnant.

RESPONDENT OPPOSED means that the respondent herself does not approve of family planning. If her husband is opposed to family planning, circle the code for HUSBAND OPPOSED. If she says she is not using because someone other than her husband tells her they are opposed to her using family planning, code OTHERS OPPOSED.

RELIGIOUS PROHIBITION means that she feels her religion does not allow the use of family planning.

SIDE EFFECTS are undesirable consequences of using a method that do not adversely affect the health of the user. For example, side effects may be spotting or bleeding with the pill, while HEALTH CONCERNS may be that she heard that the pill may be linked to breast cancer.

INCONVENIENT TO USE would be coded if she considers the contraceptive methods to be too troublesome to use, such as being messy. This is inconvenient to use, but not inconvenient to get the method, since LACK OF ACCESS/TOO FAR is a separate category.

If the woman's main reason is not listed as a response, write her response on the OTHER line and circle 'X.' If the woman does not know at all why she is not using contraception, record DON'T KNOW.

Q. 710: INTENT TO USE CONTRACEPTION IN NEXT 12 MONTHS

This question is for all women who are currently not using a method of contraception and women who were not asked about current contraceptive use because they were pregnant at the time of the interview. The purpose of this question is to see whether the respondent has any intention of using a method of family planning within the next 12 months.

Q. 711: INTENT TO USE CONTRACEPTION IN THE FUTURE

This question is similar to Q. 710. It is asked when the response to Q. 710 indicates that the respondent is not planning on using a method of family planning within the next 12 months or does not know if she will use a method in the next 12 months. The purpose is to see whether the respondent has any intention of using a method of family planning at any time in the future.

Q. 712: PREFERRED METHOD

This question is for women who think they will use a method of contraception in the next 12 months or at any time in the future. If the respondent mentions more than one method, ask her which one she prefers most; if she cannot make a choice, then circle the method that is higher on the list.

Q. 713: REASON FOR NOT INTENDING TO USE

This question is asked of women who are not currently using a method and do not intend to use a method in the future or do not know if they will use a method in the future. There are many reasons that a person may not use contraception, so listen to your respondent carefully. Record what she considers to be her main reason for not intending to use contraception.

If the woman's main reason is not listed as a response, write her response in the OTHER category and circle '96'. If the woman does not know at all why she will not use contraception, record DON'T KNOW.

Q. 714: PREFERRED NUMBER OF CHILDREN

Check Q. 216 to see whether the woman has any children who are alive. Mark the box on the right if she has no living children, and mark the box on the left if she has at least one living child. Ask the question under the marked box. If she already has living children, we ask her to imagine the time when she had no children and could choose exactly how many to have. We are not asking how many she would like to have by her current age (now), but rather, how many she would like over her entire life (including the future).

If she tells you a number, record it in the boxes by NUMBER, then proceed with Q. 715. If she gives an answer that is not a number, for example, "It's up to God," probe for a numeric response. If after probing, the woman will not state a number, write down her exact words in the OTHER category, and skip to Q. 716.

Q. 715: DESIRED SEX COMPOSITION OF CHILDREN

This question is asked of all women who gave a numerical response to Q. 714. Record the number of boys and girls preferred by the woman in the boxes provided under BOYS and GIRLS, respectively. If the woman says she does not mind what sex the child is, write the

number of such children in the boxes under EITHER. If she gives some other answer, circle '96' for OTHER and record her exact words in OTHER.

EXAMPLES: If a respondent says in Q. 714 that she would like to have six children, and in Q. 715 she would like to have two boys, two girls, and two more of either sex, you would record '02,' '02,' '02'.

If a respondent would like to have two children ('02' in Q. 714) and she wants two boys, you would record '02,' '00,' '00' in Q. 715.

If she would like to have three children and at least one of them should be a boy, record '01,' '00,' '02', since she would be satisfied with either sex for the other two children.

Finally, note that, if the woman gives a numeric response to this question, the sum of the numbers you record in the three sets of boxes must equal the total number in Q. 714. You must probe further if the numbers do not match.

Q. 716: HEARD FAMILY PLANNING MESSAGE?

We are interested in any information about family planning, whether it is a programme concerned with giving information about family planning, an advertisement about family planning, a speech in which family planning is mentioned, or a wall painting about family planning. Read the introductory words and then each line; wait for her response and code it before moving on to the next line. There must be an answer coded for each line; do not leave any blank.

Qs. 717-718: FILTERS FOR MARITAL STATUS AND METHOD USED

Q. 717 is designed to identify women who are currently married. Check Q. 301, mark the appropriate box and follow the instructions. For women who are married, you will go on to complete Q. 718 by checking Q. 330/330A (METHOD USED). If the woman's husband is currently using male sterilization, the male condom, or withdrawal, mark the first box and skip to Q. 720, since Q. 719 is irrelevant in that case. If no code is circled in Q. 330/330A, mark the second box and skip to Q. 722. Otherwise, mark the third box and continue with Q. 719.

Q. 719: WHETHER THE HUSBAND KNOWS WOMAN IS USING CONTRACEPTION

Some women may adopt contraception without their husband's knowledge. A woman may be reluctant to admit this if there is anyone who might overhear her response. Consequently, it is very important that ensure privacy when you ask this question, either by moving away from any individuals who might be listening or by asking individuals who are nearby to move away.

Q. 720: DECISION TO USE CONTRACEPTION

In this question, we want to know who mainly made the decision to use contraception. Read the entire question before accepting a response. If the respondent says that someone other than she or her husband made the decision, such as a doctor or a nurse, circle '6'.

Q. 722: HUSBAND'S AND WIFE'S PREFERENCE FOR CHILDREN

This question asks for the woman's opinion of her husband's preference compared with her own. Read the entire question before accepting a response. This is about the woman's perception and does not have to be based on an actual discussion between husband and wife.

Q. 723: WHETHER A WIFE CAN REFUSE SEX

This question is asked of all women, regardless of whether or not they themselves are married. The question is based on the respondent's own opinion, not about herself, but about married women and men in general. Men and women are often raised to believe that a good wife does not refuse to have sex with her husband when he wants it.

Note that Q. 723 consists of three parts. Take care to record a separate response for each part of the question. In the first part, the respondent is asked whether she thinks that it is justified for a wife to refuse to have sex with her husband if she knows her husband has a sexually transmitted disease. In the second part, the respondent is asked whether she thinks it is justified for a wife to refuse to have sex with her husband if she knows that her husband has sex with other women. In the third part of Q. 723, we are interested in whether the respondent thinks it is justified for a wife to refuse to have sex with her husband if she is tired or not in the mood.

L. SECTION 8: HUSBAND'S BACKGROUND AND WOMAN'S WORK

Q. 801: FILTER FOR MARITAL STATUS

This filter requires you to check Q. 301 and mark the respondent's marital status. For women who are not currently married, but have ever been married, you will need to word subsequent questions about her husband in the past tense. For women who have had more than one husband, you will ask about the current or most recent husband.

Q. 802: HUSBAND'S AGE

If you have difficulty obtaining the husband's age, use the same methods to probe for his age as described in Q. 105 for obtaining the respondent's age.

Qs. 803-804: HUSBAND'S EDUCATION

These questions are identical to Qs. 106-107, which were asked about the respondent. If a woman is currently divorced, separated, or deserted, then insert the word 'last' when asking Q. 803. The term 'school' means any kind of formal school, but does not include such things as Bible school or Koranic school or adult education classes. However, it does include technical or vocational training beyond the primary school level, such as long-term courses in mechanics, engineering, secretarial work, etc.

For Q. 804, record only the number of standards that the husband successfully completed.

EXAMPLE: If a woman's husband was attending standard 9 and left school before completing that year, record '08'. Although standard 9 was the highest year he attended, he completed only standard 8.

EXAMPLE: If a woman's husband attended only two weeks of standard 1 in primary school, record '00' for completed years.

If a respondent says simply that her husband completed primary (or that he completed secondary), you must probe to find out the exact number of standards completed. For persons with education beyond the secondary school level, you will need to find out how many years the respondent's husband completed beyond secondary. You will then add the number of years completed beyond the secondary level to the number 12 to calculate the response to Q. 804. Note that in such cases we are using 12 years as the total number of years required to finish Higher Secondary. There is no need to ask respondents whose husband's have a post-

secondary education how many standards he completed in school.

EXAMPLE: If a woman says her husband stopped after completing two years of B.A., add 2 years to 12 years of school and enter '14' in the boxes.

Q. 805: HUSBAND'S OCCUPATION

First, check Q. 801. If a woman is currently married, mark the box on the left and ask the husband's occupation. If she is not currently married, mark the box on the right and ask about the most recent (last) husband's occupation.

We are not interested in the industry that he works in (e.g., agriculture, mining, or services) or where he works (in a bank, a retail clothing store, or a government office), but we need to know what his job is. Examples of occupations are clerk, barber, taxi driver, nurse, teacher, lawyer, salesman, rubber tapper, fisherman, rice farmer, carpenter, etc.

Write the answer in the respondent's own words. Be specific. For example, if the respondent says, "He works for the Ministry of Planning", ask what the man does there. If you are not sure how to write the occupation, it is better to give more detail than less.

"Not currently working" is not an acceptable response. If he is unemployed, get a description of his most recent job. If he does more than one job, write down what he does most of the time. If he is not working because he is in school, write "student." Do not fill in the two code boxes for this question, since numerical codes will be assigned afterwards in the office.

If the respondent has been married more than once and is not currently married, then insert the word 'last' in the question.

Qs. 806-810: WOMAN'S EMPLOYMENT AND OCCUPATION

These questions are concerned with any work other than housework that the respondent herself does. The time reference for Qs. 806-808 is the seven days before the survey interview.

Q. 807 is included because it often happens that women who sell things, or work on the family farm, will not consider what they do work, especially if they do not get paid for the work. Read the introductory sentences of Q. 807 so the respondent understands what we mean by "work."

Q. 808 checks to determine if a woman normally works but was temporarily absent from work, i.e., she was on leave or was not working for some other reason during the seven-day period before the survey.

Q. 809 is directed to women who indicate they currently are not employed in a job or business and seeks information about whether the woman had done any work in the 12 months before the survey, other than her own housework.

As in Q. 805, write the respondent's occupation in her own words in Q. 810. Again, it is better to give more detail than less.

Q. 811: FILTER FOR AGRICULTURAL OR OTHER WORK

Mark the appropriate box, depending on the type of work described in Q. 810. Agricultural work includes farming, raising animals (including livestock and poultry), driving a tractor on a farm, or other activities associated with growing or harvesting agricultural products. If her job is selling food that she did not produce, she is not considered an agricultural worker. If she grows just a few crops but has another regular job, mark the box for DOES NOT WORK IN AGRICULTURE.

Q. 812: WORK ON FAMILY OR OTHER LAND

This question is asked of women working in agriculture to determine the ownership of the land on which they work. If the respondent works mainly on land belonging to herself, her husband, or her children, record OWN LAND. If she works on land that belongs to other members of her family or her husband's family, record FAMILY LAND. If the land that she farms is rented, record RENTED LAND. If she is a labourer on someone else's land or on a plantation, record SOMEONE ELSE'S LAND.

Q. 813: WHO THE WORK IS DONE FOR

This question is not asking the motivation for working but is trying to determine who the work is being done for (i.e., who the employer is). There are three categories here. Consider a woman who works in a shop as an example. If she works in a shop owned and operated by a non-family member, she works FOR SOMEONE ELSE. If her husband, parents, or in-laws operate the shop and she works for them, she is working FOR FAMILY MEMBER. If she runs the shop with her husband or runs it on her own, she is SELF-EMPLOYED. If the respondent runs a farm on her own or with her husband, she is SELF-EMPLOYED. If the respondent works on land or in a business owned by her own family but does not run the business, use code '1'; if she works as an agricultural labourer on someone else's land, use code '2'.

Q. 814: WORKS AT HOME OR ELSEWHERE

Whether the woman works at home or away from home will usually be clear. HOME means within the area of her house or compound. A woman may work on family fields that are far from the compound; in this case, you would code AWAY. If she works on a plot of land just outside the house, you would code HOME.

Q. 815: WORK ALL OR PART OF THE YEAR

Of interest here is the regularity with which a respondent is working. If she is working all year long, record THROUGHOUT THE YEAR even if she works only part-time throughout the year. If her work is seasonal, record SEASONALLY/PART OF THE YEAR. For example, if she works only during the sowing season, circle '2'. If she works occasionally, record ONCE IN A WHILE. If a respondent says that she works throughout the year but she takes one month leave every year, circle '1'. Taking vacation or leave does *not* make a response of THROUGHOUT THE YEAR invalid.

Q. 816: TYPE OF PAYMENT

This question asks for the type of payment that the respondent receives for her work. For example, a woman who sells fruit in the market to people who pay money for it earns cash for her work. If a respondent works as a domestic servant and she is not paid a salary but instead gets lodging and food, she is paid only in kind (code '3'). If she is a domestic servant and she gets food and some cash, then circle '2'. If she is a clerk and gets paid a regular salary, she earns only cash (code '1'). If she is working on the farm for her family and receives no payment, then circle '4' for NOT PAID.

Qs. 817-821: WOMAN'S CONTROL OVER AND USE OF CASH INCOME

Qs. 819-820 seek information on the extent to which a woman's paid employment is contributing to her potential empowerment within the family. Q. 821 is similar to Q. 819 except that it asks about who decides how her husband's earnings are used. Only women who are currently married and are paid all or part of their earnings in cash are to be asked Qs. 819-820 while Q. 821 is asked for all currently married women. The filters in Qs. 817-818 identify the women who

should be asked this series of questions.

Q. 819 is a single response question that asks who mainly decides how the money the respondent earns will be used. The word 'jointly' refers to the respondent's making the decisions jointly with her husband (code '3'). If the husband decides by himself, circle '2.' If someone other than the respondent and her husband (e.g., another relative) makes the decision, circle '6' for OTHER.

Q. 820 asks the respondent for her perception about the size of her earnings relative to those of her husband. Women who earn about the same or more than their husbands are likely to be more empowered in the home. If she says that her husband does not have any earnings, circle '4'.

Q. 821 is concerned with the usual situation so if the respondent indicates that her husband is temporarily unemployed, ask about the decision-making when he is working.

Q. 822 HOUSEHOLD DECISION-MAKING

Q. 822 addresses the roles of the woman and her husband in making various household decisions. Decisionmaking can be a complex process so the emphasis is again on who mainly makes a specific decision. Choose the response code most appropriate after you hear the respondent's answer about each type of decision. Use code '1' for RESPONDENT only if the woman says that she alone mainly makes the decision. When her husband alone usually makes the decision, circle '2.' If she has to consult with her husband and then whatever decision they come to together is implemented, circle '3.' If, for example, she says that her parents-in-law mainly decide about her visits to her family or relatives, then circle '4' for SOMEONE ELSE. If she says it depends on the circumstances, or gives any other answer that cannot be coded in the first four categories, circle '6'.

Q. 823: WHETHER RESPONDENT HAS OWN MONEY

Q. 823 asks whether the respondent has any money of her own that is completely under her control, meaning she can decide how to use the money alone, without consulting with her husband (if married) or anyone else. In this question, the amount of money does not matter. What is important is whether she has any money at all, however small the amount, which she can use as she wants without anyone's permission.

Q. 824: FREEDOM OF MOVEMENT

We want to know whether the respondent is free to go alone to places that she needs to go to. There are three parts to this question. Be sure to record responses for each part before going on to Q. 825. Note that this is not a question of whether the respondent likes to go alone or not, or whether she is capable of going alone or not; it is a question about whether she is usually *allowed* to go alone or not. If a response is not clear, probe to determine which code to circle. Note that the question about going to the health facility refers to going to the health facility for any reason such as to pick up medication for someone else, not just to get treatment for herself if she is ill. Thus if a respondent says that if she is ill no one will want her to go alone, repeat the question and explain that we are interested in knowing whether she would be allowed to go alone, only with someone else, or not at all if she is not herself ill. If the respondent says "My husband always goes with me to the health facility", ask her whether he would let her go alone if one day he could not accompany her. Circle code '1' for ALONE only if she says that yes, he has no problem with her going alone. Code '2', WITH SOMEONE ELSE ONLY, should be used when she is not allowed to go without being accompanied by another person. If a respondent says, how can she go alone if she herself.

Q. 825: BANK ACCOUNT

The account can be joint or sole and it can be in any bank or other type of savings institution. We are interested in whether the respondent has at least one account.

Q. 826: KNOWLEDGE OF PROGRAMMES FOR GIVING LOANS TO WOMEN FOR BUSINESSES

There are many different kinds of schemes that are set up to loan money to women to start their own business or do work to earn money. For example, micro-credit programmes give loans to rural women to buy a cow to start getting and selling milk, or to women to buy a sewing machine so that they can work as a tailor. We want to know if the respondent knows of any such programme that gives loans to women to start or expand their business.

Q. 827: APPLIED FOR A LOAN

If a woman knows about special schemes that make loans to women, we want to know if she herself has ever taken a loan to start or expand a business from any of these programmes.

Q. 828 PRESENCE OF OTHERS

This is not a question to ask the respondent, but something that you answer yourself. Just look around and see who else is within listening distance while you are interviewing. If a supervisor or field editor is observing the interview at this point, be sure to include her or him as another female or male present. Do not leave any row blank.

Q. 829: ATTITUDES TOWARD BEATINGS

Read the statement at the top of the question, then ask the question, reading each item separately. Wait for her answer before going on to the next item. If the respondent does not understand the question, you should read it out again. Be sure to read each item clearly. Sometimes respondents misunderstand the question and think you are asking about their personal experience. This question is about the *respondent's opinion* and not about what is happening in her relationship with her husband. Be sure that the respondent has understood the question before accepting an answer. There are seven parts to this question. Record a response for each item before going on to Section 9.

M. SECTION 9: HIV/AIDS AND OTHER SEXUALLY TRANSMITTED INFECTIONS

AIDS is an illness caused by the HIV virus that weakens the immune system and normally leads to death through secondary infections, such as pneumonia or tuberculosis. It is transmitted sexually or through contact with contaminated blood. This section asks a group of questions on knowledge of and behaviour related to AIDS and other diseases that are transmitted through sexual contact.

Q. 901: HEARD OF AIDS

This question allows us to determine whether a respondent has heard of AIDS. If there is a local term for AIDS, use the local term in addition to the word 'AIDS'.

Q. 902: SOURCES OF INFORMATION ABOUT AIDS

This question seeks to obtain information about where women are hearing and learning about AIDS. Circle all the sources of information mentioned by the respondent. If a respondent gives an answer that is not on the list, circle 'X' for OTHER and write the source in the space provided.

Qs. 903-910: KNOWLEDGE OF WAYS TO AVOID/REDUCE CHANCES OF GETTING THE AIDS VIRUS AND LOCAL MISCONCEPTIONS ABOUT AIDS

There are two types of questions in Qs. 903-910. One type of question describes specific behaviours to determine whether people know which specific behaviours can reduce people's chances of getting the virus that causes AIDS. Behaviours that can reduce the chances of getting the AIDS virus are asked about in Qs. 903, 905, and 908. These are the actions that people can take to reduce their chances of getting AIDS that are often advocated in public health programmes: being faithful to one uninfected partner, condom use, and abstinence (not having sexual intercourse).

The other type of question is asked to measure how many people hold incorrect beliefs about the way AIDS is transmitted. The other questions (Qs. 904, 906, and 907) ask about commonly held misconceptions about the way AIDS is transmitted.

After we've asked about specific behaviours, we ask the respondent in Q. 909 if she knows any other ways of avoiding AIDS. In Q. 910 we ask respondents who indicate they know other ways to mention the ways they know about. You are to record all the ways mentioned. If the respondent answers "practice safe sex", ask what she means by safe sex, and record the answer appropriately. When a respondent gives an answer that is not on the list, circle 'W' for OTHER and write the answer in the space provided. If the respondent provides two answers that are not on the list, you should use code 'W' for the first response and code 'X' for the second response.

Q. 911: HEALTHY-LOOKING PERSON WITH AIDS VIRUS

This question asks whether the respondent believes that a person who appears to be in good health can have the AIDS virus.

Q. 912: TRANSMISSION FROM MOTHER TO CHILD

This question asks whether a mother who has the AIDS virus can pass the virus on to her baby.

Q. 913: MEDICINE TO REDUCE OF RISK OF TRANSMISSION FROM MOTHER TO CHILD

This question is asked to respondents who say that the virus that causes AIDS can be passed on from a mother to her child. Ask the respondent if she/he knows of any special medications that a doctor or a nurse can give to a woman infected with the AIDS virus that can reduce the risk of transmitting the AIDS virus to her baby.

Q. 914: MEDICINE FOR PEOPLE WITH AIDS

This question is asking only about medicine that would be provided by a doctor or nurse to help a person with the AIDS virus live longer. Home remedies the respondent may know about are not to be recorded here.

Q. 915: EVER BEEN TESTED FOR THE AIDS VIRUS

All respondents are asked whether or not they have ever been tested for the AIDS virus. Be clear to the respondent that we do not want to know the result of the test, only whether or not she has ever been tested.

Q. 916: TIMING OF LAST TEST FOR THE AIDS VIRUS

Ask when the last time the respondent was tested for the AIDS virus was. If the respondent knows she was tested, but is not sure when the test was done, probe to obtain an estimate of

how long ago it was. If she says 3-4 years ago, you don't have to probe further since both of those answers fit in the same response category.

Q. 917: WHETHER RESPONDENT REQUESTED THE TEST

If the respondent has been tested for the AIDS virus, we want to know whose idea it was to get the test the last time she was tested. There are four options, so read the entire question before accepting an answer. Perhaps the respondent asked to be tested for the AIDS virus. Perhaps a health worker offered to test the respondent and the respondent accepted being tested. It is also possible that the test was required or the test may have been performed without the woman's consent.

For example, you would record ASKED FOR THE TEST if the woman decided on her own to get tested or if her husband or a friend suggested that she get tested and she was willing to do so. In those cases, she got the test of her own volition. By REQUIRED, we mean formally required. For example, an employer may require their employees to get tested for the AIDS virus or job applicants may be required to take an HIV test as part of the job application. Also, some foreign countries require applicants applying for work permits or for visas to show proof of an HIV test.

Q. 918: RESULTS OF AIDS VIRUS TEST

Ask the respondent if she was told the results of the HIV test. Sometimes people are tested for the AIDS virus but are not told whether or not they have the virus, or do not go back to get the result. Be clear to the respondent that you are not asking to know the results of the test (whether or not she has the virus), only whether the respondent knows the result of her test. If the respondent has been tested more than once, we are asking whether the respondent knows the result from the last time she was tested.

Q. 919: WHERE AIDS VIRUS TEST WAS DONE

Ask the respondent where the AIDS virus test was done. If the respondent does not know whether the place where the test was done is part of the public or private medical sector, ask the respondent the name of the place, record it in the space provided, and inform your supervisor after you complete the interview. Once again, if she has had more than one test, we are asking about the last time she was tested.

Qs. 920-21: KNOW WHERE TO GO TO GET TESTED

For those respondents who have never been tested for the AIDS virus, we ask if they know of a place where people can go to get tested. Follow the same procedure as for Q. 919 in recording the place. However in this question you will record all the places respondents know about for testing.

Qs. 922-926: ATTITUDES TOWARDS PEOPLE WITH AIDS

These five questions are asked to ascertain the respondent's own personal opinions and attitudes towards people with AIDS. To obtain this information, we present hypothetical (imaginary) situations to respondents and ask them to tell us how they would react to the situation. The questions address the following situations:

- Willingness to buy vegetables from a vendor with the AIDS virus.
- The decision about whether to keep the status of a family member infected with the AIDS virus a secret or not.
- Willingness to care for a relative ill with the AIDS virus in their own household.

- Attitude about a female teacher infected with the AIDS virus continuing to teach.
- Attitude about a male teacher infected with the AIDS virus continuing to teach.

For example, if a school learns that a female teacher has the AIDS virus, but she is not sick, does the respondent think that the teacher should be allowed to continue teaching in the school? We are not asking about whether or not a teacher has actually been asked to leave a teaching position or how such a case would be legally treated. Instead, we want to know the respondent's opinion about how such a case should be handled; should the teacher be allowed to continue teaching?

Q. 927: KNOWLEDGE OF OTHER SEXUALLY TRANSMITTED INFECTIONS

Check 901, mark the appropriate box, and then ask the appropriate question about whether the respondent knows other diseases that can be transmitted through sexual contact. She is not being asked to actually tell you what specific sexually transmitted infections she knows about, but only whether or not she has heard about a disease other than AIDS that is transmitted through sexual contact.

Q. 928: FILTER FOR EVER HAD SEXUAL INTERCOURSE

This filter requires you to check Qs. 316 and 317 to determine if the respondent has ever had sexual intercourse.

Q. 929: FILTER FOR KNOWLEDGE OF STIs

This filter requires you to indicate whether the respondent has heard about sexually transmitted infections other than AIDS after checking, Q. 927. In doing this, be sure to use the response codes to the right of Q. 927, not the boxes above the question.

Qs. 930-932: SEXUALLY TRANSMITTED INFECTION

We want to know if the respondent has had a sexually transmitted infection (Q. 930) or symptoms of a sexually transmitted infection (Qs. 931-932) in the past 12 months. Symptoms of an STI include abnormal (foul smelling) discharge from the vagina or sores or ulcers around the vagina.

Q. 933: FILTER FOR HAD INFECTION

This filter requires you to check Qs. 930-932 to determine if the respondent has recently had a sexually transmitted infection or symptoms associated with such infections.

Qs. 934-935: ADVICE OR TREATMENT SOUGHT FOR STI

Ask the respondent whether the last time she had the problem(s) she sought advice or treatment (Q. 934). If the respondent answered YES to Q. 930, word Q. 934 as "The last time you had a disease which you got through sexual contact, did you seek..." If Q. 930 is NO or DK, but Q. 931 and Q. 932 are YES, word Q. 934 as "The last time you had an abnormal discharge or a genital ulcer, did you seek..."

If the respondent sought treatment, ask from whom the treatment or advice was sought. Note that if the respondent mentions more than one source of advice or treatment for STIs, record all her answers since this is a multiple-response question.

Qs. 936A-D: FAMILY LIFE EDUCATION FOR BOYS AND GIRLS

Questions 936A-B are about the *respondent's opinion* regarding whether *boys* should be taught about family life education in school and, if yes, at what age. Read the statement at the top of the question, then ask Q. 936A, filling in the blank with the words in item 'a' (then item 'b', item 'c', etc.). For example, for Q. 936A, you will ask the respondent, "Should boys be taught about moral values in school?" Circle code '1' or '2' for YES or NO according to the respondent's answer. If the respondent answers YES, you will then need to ask Q. 936B (item a), "At what age should boys first be taught this topic in school?" Be sure to circle the appropriate code before moving on to the next part of the question. Most of the items are self-evident.

If at any point the respondent does not understand a part of the question, you should read it out again. Be sure to read each item clearly. Sometimes respondents misunderstand the question and think you are asking about their child's experience. These questions are about the *respondent's opinion* and not about what is happening in her child's school. Be sure that the respondent has understood the question before accepting an answer.

Follow the same instructions for Qs. 936A-936B for Qs. 936C-936D. Qs. 936C-936D are about family life education for *girls*. It is important that you ask these questions only after you have completed coding all responses to Qs. 936A-936B for boys. Do not combine the questions about boys and girls. We have divided these questions deliberately.

N. SECTION 10: HOUSEHOLD RELATIONS

This section asks a series of questions on household relationships and on the treatment of women in the household. Due to the extremely sensitive nature of the questions in this section, it is very important that you do everything possible to ensure the safety of the respondent and the ethical implementation of these questions. Note that this section is an exception because even if there is more than one eligible woman in the household, **ONLY ONE** woman will be asked this set of questions.

Q. 1000: FILTER FOR WOMAN'S ELIGIBILITY FOR QUESTIONS ON HOUSEHOLD RELATIONS

Question 1000 is a filter that requires you to check the cover page of the questionnaire to determine if the respondent you are interviewing has been pre-selected for this questionnaire section. Accordingly, turn to the cover page of the questionnaire that you are filling out and examine the box below the woman's address. If the box is coded '2' for NO, skip to Q. 1028 and end the interview. If the box is coded '1' for YES, continue to Q. 1001.

Q. 1001: FILTER FOR PRIVACY

Q. 1001 is a very important instruction for you, and not a question for the respondent. Check your physical surroundings for the presence of others. Check both the area you are sitting in and all areas within hearing distance. Be sure that there is privacy in the sense that there are no persons anywhere near you who will be able to hear and understand your questions. If there are children within hearing distance old enough to understand your questions ask them politely to leave. Only small infants not capable of understanding can remain. Do not proceed with the interview until you have ensured privacy.

The importance of these data cannot be overemphasized and you must do everything you can to obtain privacy before the interview can continue. If, despite all your best efforts, you are unable to obtain privacy and to be alone with the respondent, then you will have to skip the section. But remember that you must do everything you can to obtain privacy so that you can fill out this section. Mark the appropriate code. If you are unable to obtain privacy, circle code '2',

skip to Q. 1027 and fill out an explanation of what happened. If privacy has been obtained, circle code '1' and proceed with the rest of the section. Speak clearly and be very considerate of the feelings of the respondent. Keep your voice low throughout the interview.

When asking the questions in this section, you should avoid showing curiosity, surprise, or any other emotion, whether favourable or unfavourable. Be aware that these topics can be difficult for the respondent to address. She may be embarrassed or fearful of her husband or others, or she may just feel that these matters are too private to discuss. It is your job to win her trust so that she feels comfortable reporting such personal information to you.

INTRODUCTORY STATEMENT

The introductory sentences after Q. 1001 and before Q. 1002 should be treated like an additional informed consent procedure. The respondent should be reassured about the confidentiality of the information. If there is more than one eligible woman in the household, you should informally explain to this respondent that no one else in the household is being asked the questions that the respondent is going to be asked and that no one else will know what has been discussed. After reading the introductory statement, answer any questions the respondent may have. If the respondent does not object, you should proceed with the interview.

Q. 1002: FILTER FOR MARITAL STATUS

Check Q. 301 for the respondent's marital status. If she is currently married, mark the first box and continue to Q. 1003. If she is not currently married but has ever been married, mark the box 'formerly married' and continue to Q. 1003, but ask questions 1003-1013 in the past tense referring to her last husband. If the woman has been married more than once be sure to refer in all questions 1003 to 1013 to her most recent husband.

If she has never been married or is married but gauna has not been performed, mark the last box and skip to Q. 1014.

Q. 1003: QUESTION ON MARITAL CONTROL BY THE HUSBAND

Q. 1003 focuses on aspects of marital control. Answering these questions could be particularly difficult for the respondent. For each item, read the item and then pause, giving the respondent enough time to give her answer. Do not force her to respond if she is unwilling. Record her response before asking the next item. Remember to keep your voice calm and low.

Note that you have to phrase the questions according to the actual marital status of the respondent. For example, if a woman is formerly married, ask Q. 1003 like this: "...Please tell me if these apply to your relationship with your last husband? He was jealous or angry if you talked to other men?" If the respondent is currently married ask: "...Please tell me if these apply to your relationship with your husband? He is jealous or angry if you talk to other men?" Read each item, get a response and then go to the next item.

Qs. 1004A-1004B: EMOTIONAL AND PHYSICAL TREATMENT OF WOMEN

Again, it is necessary to ask the questions according to the actual marital status of the respondent. The questions asked have several different parts. Each part should be read out slowly and clearly so that the respondent hears the entire question. After each question, pause and give the respondent sufficient time to answer.

Before asking Q. 1004B for any item marked YES in Q. 1004A, check Q. 301 for whether the respondent is a widow or not. This is because Q. 1004B should ONLY be asked if the respondent is NOT a widow.

In Q. 1004A, we are interested in knowing whether the respondent has suffered any form of emotional abuse by her husband. As in earlier questions, first read the introductory statement then ask each item slowly and clearly. If the answer to an item is YES, circle code '1' and then ask question Q. 1004B (only if the respondent is not a widow) to determine how often each type of incident occurred in the preceding 12 months.

The answer codes for Q. 1004B are 'OFTEN', 'SOMETIMES', and 'NOT AT ALL'. Respondents may not always give you an answer in these terms. For example, a respondent may ask "What do you mean by 'often'?" In this case you should respond with "Whatever you yourself consider to be often". If she gives you a quantitative answer such as "It happened once or twice last year", then use the following general rule of thumb: If it occurred 5 or more times over the last 12 months, code it as OFTEN. If it occurred 1-4 times, code it as SOMETIMES.

In Q. 1004A(a), we are trying to determine whether or not the respondent has felt humiliated in front of others because of something her husband said or did. The focus is on her feeling humiliated, not on what the husband said or did. For example if a respondent says "He often scolds me in front of guests and I feel really bad" circle code '1'. If she is not a widow, ask her Q. 1004B. If she is a widow, skip Q. 1004B(a) and ask Q. 1004A(b).

In Q. 1004A(b), we want to know whether or not the husband has done something that made the respondent feel afraid for either herself or someone close to her, like her children or her mother. The type of harm threatened is not important here; rather the respondent's own perception that there was a threat is important. If the respondent says YES, circle code '1' and ask question Q. 1004B if she is not a widow.

In Q. 1004A(c), we want to know whether her husband makes her feel bad about herself through insults or any other means. Examples include making her feel that she is no good at anything, she does not know how to behave, etc. Again, we are not interested in what he does or says, but whether the end result is that the respondent feels bad about herself. If the respondent says YES, circle code '1' and ask question 1004B if she is not a widow.

Qs. 1005A and 1005B: Q. 1005A addresses physical and sexual violence perpetrated by the husband. Respondents may find these questions painful, and some respondents may get emotional or upset. If a respondent does lose her composure, be sympathetic and kind. Give the respondent a chance to recover before proceeding. Do not force the respondent to answer; at the same time, keep in mind that, however painful, many respondents are willing to share this information if you are patient, non-judgmental, and sympathetic. As in Q. 1004A, circle code '1' in Q. 1005A for an affirmative response to an item and ask Q. 1005B (if the woman is not a widow) to determine frequency of the behaviour in the past 12 months, before proceeding to the next item.

Most items in Q. 1005A are self-explanatory. Respondents might not see the distinction between items (h) and (i). Item (h) asks about the use of force to have sexual intercourse, whereas item (i) asks about the use of force for sexual acts other than sexual intercourse. We are not trying to find out what the acts are. Just whether the respondent was forced to do something that she did not want to do sexually. Remember that if a respondent says YES to an item on Q. 1005A, she is asked Q. 1005B ONLY if she is not a widow. If she is a widow, you will skip Q. 1005B and ask the next item. For coding responses to Q. 1005B, see the guidelines in Q. 1004B.

Q. 1006: FILTER

Check Q. 1005A (a-i). If the respondent answered “YES” to at least one of the questions, mark the box on the left and proceed to the next question. If not a single answer was “YES”, mark the box on the right and skip to Q. 1009.

Q. 1007: THE TIME OF FIRST OCCURRENCE

This question allows us to determine when the physical and/or sexual violence by the husband first began in relation to the start of the marital relationship. Note that we want to know the timing of the first occurrence of abuse. If one or more items in Q. 1005A have been coded ‘1’, then we want information on the first time that any of the coded things happened. For example, if the respondent has said YES to being slapped (Q. 1005A(a)) and to being attacked with a knife (Q. 1005A(g)), then we want to know when it was that she was first slapped or attacked, whichever type of abuse happened first. If the response given is less than one year after they got married, record ‘00’; otherwise, record the answer in the completed number of years. For example, if the respondent says “One and a half years after marriage”, write ‘01’ in the boxes. If the first act of violence occurred before the couple got married, circle code ‘95’.

Q. 1008: INJURIES

We are interested in knowing whether the respondent has been physically hurt as a result of some deliberate act by her husband at any time in their relationship. Anything that was a clear accident is not being counted. In Q. 1008(a), ‘cuts’ refer to injuries in which the skin is broken and ‘bruises and aches’ refer to injuries in which the skin was not broken. Q. 1008(b) refers to *severe* burns. Q. 1008(c) refers to serious injuries to the eyes, actual sprains, bones dislocated but not completely broken, and *minor* burns. Finally Q. 1008(d) refers to wounds that are more than just a cut, broken bones, broken teeth, and other serious injuries.

Qs. 1009-1011: WOMAN’S BEHAVIOUR TOWARD HER HUSBAND

Q. 1009 seeks to determine whether or not the respondent herself is ever an instigator of domestic violence. Read the question slowly so that the respondent hears all parts. This question encompasses any act that would physically hurt the husband. All acts such as those asked about specifically in Q. 1005A are included even though we are not listing them again separately. If the respondent says that she has never hit, slapped, kicked, or done anything else to physically hurt her husband, circle code ‘2’ for NO and skip to Q. 1012. Also circle code ‘2’ if the respondent says that she has done something to physically hurt her husband only after he had begun to beat her. If the respondent says “I hit him in self-defense”, probe to find out whether he was already beating her when she hit him or whether she hit him first. If she has never hit him first, circle code ‘2’; if she has hit him first whether in self defense or not, circle code ‘1’.

Q. 1011 is only for women who have said that they have hit their husband when he was not hitting them (code ‘1’ in Q. 1009). Before asking question Q. 1011, check Q. 301, for whether the respondent is a widow or not. Q. 1011 can ONLY be asked if the respondent is NOT a widow. If she is a widow, skip to Q. 1012.

In Q. 1011 we are interested in knowing the frequency with which the respondent has done anything to physically hurt her husband during the last 12 months. The response should NOT include the times that the wife abused the husband when he was already beating or physically hurting her. See instructions for Q. 1004B for what to code as OFTEN and SOMETIMES.

Qs. 1012-1013: HUSBAND’S DRINKING

In Q. 1012, we are interested in knowing whether or not the husband drinks alcoholic beverages. If the husband drinks alcohol, the response should be YES regardless of the type of

alcoholic beverage or the frequency of consumption. If the response is YES, circle code '1' and proceed to Q. 1013. If the response is NO circle code '2' and skip to Q. 1014.

Question Q. 1013 is only asked of respondents whose husbands drink alcoholic beverages. In this question we are interested not in the frequency of drinking but the frequency of getting drunk—whatever it is that the respondent understands by 'drunk'. If she asks you what you mean by being 'drunk', explain that a person is considered 'drunk' if he has had so much alcohol that he is not in complete control of himself.

Q. 1014: HISTORY OF ABUSE

This question is asked of all women, whether or not they have reported abuse by their current or last husband. Check Q. 301 for marital status. Ask the question corresponding to the respondent's marital status.

For ever-married women, ask the version of Q. 1014 which is on the right. All ever-married women have already been asked about abuse by their current or last husband in earlier questions. In this question, they are being asked about abuse by any other person since they were age 15. For example, a currently married woman may have been abused by a former husband or by one of her in-laws.

For women who have never been married or are married but gauna has not been performed, ask the version of Q. 1014 which is on the left. Note that this is the first time that these women are being asked about any type of abuse.

For both sets of women, read the question slowly, pausing briefly after each type of violent act mentioned. If the respondent answers NO or refuses to answer, skip to Q. 1017. If the respondent answers YES, then proceed to the next question.

Q. 1015: WHO HAS ABUSED RESPONDENT

This question seeks to find out who, other than the respondent's current husband (or the most recent husband for women who have been married but are not currently married), has physically hurt the respondent. Circle all those persons the respondent mentions. If she mentions someone who is not listed in the response categories, circle "X" and specify who it is. Do not write the name of the abuser. Note that you should record all the persons she mentions.

Q. 1016: RECENT ABUSE

This question seeks to find out how often the person(s) mentioned in Q. 1015 physically hurt, hit, slapped, or kicked the respondent. If more than one code is circled in Q. 1015, then you must find out the frequency with which this occurred in the past year, irrespective of which of the persons mentioned in Q. 1015 was doing it. So if a respondent said that both her step-mother and step-father beat her, find out whether, in total, she was beaten often, sometimes, or not at all in the past 12 months. Circle the appropriate code.

Qs. 1017-1019: FORCED SEX

Q. 1017 is trying to find out whether the respondent has ever been forced by anyone to have sexual intercourse or to perform any other type of sexual acts. No definition of force is being given here—force is whatever the respondent considers to be force. What is important is that the respondent thinks that she was being forced and had sex or performed any other sexual acts against her will. This could have happened in her childhood or adulthood.

Qs. 1018 and 1019 are asked only of those respondents who report that they were forced to

have sexual intercourse or perform a sex act at some time in their life. Q. 1018 asks the respondent how old she was the first time she was forced to have sexual intercourse or perform a sexual act. Record the age in completed years. The respondent is asked in Q. 1019 to say who forced her to have sexual intercourse or perform any other sexual act the first time it ever happened to her. Make sure the respondent knows you are not asking for the person's name.

Q. 1020: RECENT FORCED SEX

Check Q. 301 for respondent's marital status. Ask the appropriate version of the question according to the respondent's marital status. Note that the time frame for this question is the 12 months before the interview and that the question refers to sexual intercourse or any other sexual acts.

Q. 1021: FILTER

Check questions 1005A (a-i), 1014, and 1017 for 'YES' responses to questions about abuse. Check the appropriate box and follow skip instructions. Only women who have reported any kind of abuse are asked the following questions. If the respondent has not experienced any kind of abuse, that is, there is not even one YES in any of the questions, then skip to Q. 1025. If there is at least one question that is coded YES, then ask Q. 1022.

Qs. 1022-1024: HELP SEEKING

Q. 1022 refers to any kind of help that the respondent may have sought *to try and stop the abuse*. She could have asked her own family or gone to the police, for example. The nature of the help being sought is not important, but only whether she ever sought help and from whom (Q. 1023). If she did seek help, code all the persons/types of people she sought help from in Q. 1023. Make sure to probe for more responses. All women who are asked Q. 1023 are skipped to Q. 1025.

Q. 1024 should be asked only of women who reported that they did not seek help for the abuse from anyone. With this question, we want to know if they have at least told anyone about the abuse.

Q. 1025: RESPONDENT'S FATHER AND MOTHER

In this question we are interested in knowing whether the respondent's father ever beat her mother. All women are asked this question even if they have not experienced violence themselves. If the respondent says "I'm not sure whether my father beat my mother, but I think so", circle code '1' for YES.

THANK RESPONDENT

Remember to thank the respondent for her cooperation and reassure her of the confidentiality of her responses.

If the respondent has asked you for help regarding the violence, provide her with contact information for organizations that can help her. This information should be provided only if the woman has asked for assistance, and only after the completion of the interview. You must ensure that the information is provided in complete privacy. If you write down the information for her on paper, be sure to tell the respondent to keep the information (as long as the designated household head is a usual member of the household) carefully and not leave it lying around.

Q. 1026: OBSERVATIONS

Q. 1026 provides information on the extent of privacy maintained during the administration of the household relations section of the interview. This is not a question for the respondent, but something you answer yourself. Circle a code in each line of Q. 1026 to indicate whether or not the household relations section of the interview was interrupted by the respondent's husband, another male adult, or a female adult. We are interested here in knowing which persons interrupted this section of the interview and how frequently. If the husband walked through the room once and later came in to ask the respondent a question, circle code '2' for YES, MORE THAN ONCE. Such interruptions may influence the respondent's answers. Remember, in no circumstances should you have continued the interview unless there was no one who could have heard the questions.

Q. 1027: COMMENTS/EXPLANATION

If the household relations section could not be completed, use this space to give a complete explanation. You must explain why you were unable to obtain privacy. If you were able to complete the interview, give any information in this space that might help to interpret the results of the household relations section. Also note any factors that may have influenced the respondent's answers.

Q. 1028: TIME INTERVIEW ENDED

Do not forget to write the time when you finished the interview, using the 24-hour system. If there was an extended break during the interview time; for example, the respondent excused herself to care for a sick child and returned to complete the interview 45 minutes later, make a note to report how long a break was taken.

Be sure to thank the respondent for her cooperation. At this point, check your questionnaire carefully. Before leaving the house, make sure you have followed the skip patterns correctly and that your marks are legible. Also, inform the respondent that a health investigator will be coming to her household to weigh and measure the height of the respondent (and her young children), and conduct a test for anaemia. If she has any simple, general questions about the measurements, you can answer them, but tell her that the health investigator will explain the measurements in more detail and will answer any questions she may have.

O. INTERVIEWER'S OBSERVATIONS

After you have checked over your questionnaire and thanked the respondent, note any comments on the next-to-last page. You may make comments about the woman you interviewed, about specific questions on the questionnaire, or about any other aspects of the interview. If anything about the interview was unusual or should be brought to the attention of the editor or supervisor, note it here. Even if the interview was straightforward, a few comments on each interview will be helpful in editing and processing the questionnaires. For example, if a respondent attended school in a different country, with a different system of standards or grades, note that here. You may wish to explain why a result code was other than '1'. If answers that were not precoded require further explanation, use this space, but be sure to note in the margin of the original question that there is a comment in the Interviewer's Observations. All these comments are helpful to the editor, supervisor, and data processing staff in interpreting the information in the questionnaire.

P. RETURN TO HOUSEHOLD QUESTIONNAIRE

After completing interviews with all eligible women in the household, return to Column (72C) in the Household Questionnaire. Copy the month and year of birth from Q. 215 for all children in any woman's birth history that are listed in Column (72C) in the Household Questionnaire. Confirm that the Line Number in Q. 219 in the birth history is the same as the Line Number in Column (69) of the Household Questionnaire. Complete the remaining information in Column

(72C) by asking the day of birth for children whose month and year of birth were copied from the birth history and asking the day, month, and year of birth for all other children.

Q. CALENDAR

GENERAL DESCRIPTION OF THE CALENDAR

The calendar is located at the end of the Woman's Questionnaire. It is called a "calendar" because it is where you will record information about the timing of recent events in the respondent's life. The calendar is "recent" in that only events occurring in 2001 or later are included.

On the vertical axis of the calendar, there are boxes representing one month of time divided into sections, each representing one calendar year or 12 months of time. On the horizontal axis are four columns in which to record information about the woman's experiences with marriage, childbearing, and contraceptive use during the calendar period. Specifically information is obtained on the following experiences in the woman's life:

- Column (1): Live births, pregnancies, and contraceptive use
- Column (2): Ultrasound conducted during pregnancy
- Column (3): Marriage
- Column (4): Reason for discontinuing contraceptive use

In this section, we discuss the methods by which you are going to fill in the calendar. But before we proceed, a couple of points need to be understood:

- 1) You may at this point ask, "What and where are the questions that I am supposed to ask that will allow me to complete the calendar?" First, the calendar is completed at the same time that the Women's Questionnaire is completed. The information you need to complete the calendar is drawn directly from the responses to questions in Sections 2 (Reproduction), 3A (Marriage and Cohabitation), and 3B (Contraception) in the questionnaire.

Second, the calendar will give you a visual "snapshot" of the woman's last few years of life that will help you to ask probing questions as necessary to improve the accuracy of the information. The calendar is built in a series of steps. At each step, you can and should determine whether or not a woman's response is consistent with previous responses and where to place the event in relation to other events. For example, if there have been 12 months between the birth of Baby A and the beginning of the pregnancy resulting in Baby B, you can easily see in the calendar that these 12 months need to be accounted for in terms of use or nonuse of a contraceptive method.

There are many ways to get this information, and the calendar allows you to be innovative in obtaining the responses you need to completely fill in the calendar with the correct codes. Simply bear in mind that there may well be more than one correct way to "build" the calendar.

- 2) Whereas interviewing procedures may be flexible, the method of recording information on the calendar is not. Only certain codes (shown to the left of the calendar) are acceptable for use in the calendar. You need to translate the woman's responses to codes. Only one code may appear in each box.

Column (1): LIVE BIRTHS, PREGNANCIES, AND CONTRACEPTIVE USE

The first column of the calendar provides a record of the timing of all live births, pregnancies and

periods of contraceptive use. **Every month in Column (1) up to the month of interview must be accounted for, i.e., filled in with a code.**

The following describes the codes used in recording information in Column (1):

Q. 226 **Pregnancies ending in live births.** The first entry in the calendar will be made after you have completed and checked the responses in the birth history (Qs. 212-224). As Q. 226 instructs, for each live birth in January 2001 or later (Q. 215), you will place a 'B' in the month of birth and a 'P' in each of the preceding months according to the duration of the pregnancy. For each birth, the number of 'P's must be one less than the number of months that the pregnancy lasted because the 'B' represents the final month. The child's name should be recorded to the left of the 'B.'

Q. 227 and 228 **Current pregnancy.** For women who are currently pregnant, place a 'P' in the month of interview and in each preceding month of pregnancy. The number of 'P's in the calendar should equal the number of months of pregnancy given in Q. 228.

Qs. 232 and 234 **Pregnancies ending in a nonlive birth.** For all pregnancies that ended in a nonlive birth in January 2001 or later, place a 'T' in the month of pregnancy termination and a 'P' in each month of pregnancy. For example, if a miscarriage occurred in the fourth month of pregnancy (i.e., after three completed months) in June 2001, then place one 'T' in June 2001 and one 'P' in each of the three preceding months.

Qs. 323 and 343-344 **Contraceptive use.** For contraceptive use in January 2001 or later, write the code for each method used in the months it was used. If more than one method is used during a period, record the method that appears highest on the list of method codes. If a method was used for an extensive period (at least four months), enter the code in the first month of use and next to last month of use and connect them with a squiggly line. As a last step, months without any method use (and no pregnancy or pregnancy termination) should be coded '0' indicating that no method was used.

Column (2): ULTRASOUND CONDUCTED DURING PREGNANCY

Qs. 226, 229, 235, and 237: The second column of the calendar provides a record of whether an ultrasound test was conducted during any of the woman's pregnancies that are included in the calendar, whether or not the pregnancy ended in a live birth. If an ultrasound test was not conducted at any point during the pregnancy, record code 'N' for NO in the calendar in the month the child was born, the month the pregnancy was terminated, or the current month for the current pregnancy. If an ultrasound test was conducted during the pregnancy, record code 'Y' for YES. Note that you should not enter code 'Y' in the month the ultrasound was actually performed, but rather in the month the child was born, the month the pregnancy was terminated, or the current month for the current pregnancy.

Column (3): MARRIAGE

All months married since January 2001 (Q. 302 or 314) are coded 'X' in Column (3) and months not married are coded '0'. For women who are married but gauna was not performed, enter 'N' for each month married but gauna was not performed. If a marriage lasts for an extensive period, mark an 'X' in the first month and next-to-last month of a marriage (or the first month and the month of survey if the respondent has been married for the entire calendar period) and connect them with a squiggly line to show that the marriage extended over the entire period. You may use the same method with code 'N' for the portion of the union during which gauna was not performed. As a last step, all of the months during which the respondent was not in a marriage should be coded '0'. Note that NOT MARRIED includes all periods in which the woman was never married, widowed, divorced, separated, or deserted. **All months in Column (3)**

must be coded (i.e., until the month of the interview).

Column (4): REASON FOR DISCONTINUING CONTRACEPTIVE USE

For every discontinuation of a method, the reason for discontinuation is recorded in Column (4) in the last month the method was used during a particular episode of continuous use (Q. 344). If the woman had several reasons for stopping use, probe to identify the main reason.

Example: A woman stopped using the pill in April 2002 because she was experiencing side effects and her husband disapproved. After probing, the woman indicated that the side effects she experienced were the main reason she discontinued. Code '6' (SIDE EFFECTS) should be recorded in March 2002 in Column (4).

Points to Remember

- Only one code is entered in any one box (month) of the calendar.
- In Columns (1) and (3), all months up through the month of interview should be filled in.
- To label the births, write the child's name to the left of the 'B.' This will make your work easier and more accurate because birth dates serve as your best reference points.
- Column (2) records whether an ultrasound test was performed during each pregnancy. The code is entered in the month of birth or pregnancy termination or the current month for a current pregnancy. All other boxes are left empty.
- Column (4) records a reason for each interruption of method use that occurs in Column (1). The code is entered in the last month of use; all other boxes are left empty.
- Each squiggly line must have both endpoints defined by the same code.
- Always refer to information that is already in the calendar to help the respondent recall dates. And remember, the calendar is built in steps; each entry should be consistent with previous entries.

ILLUSTRATIVE CASES

In this section, we provide examples that illustrate how to complete the calendar. Up to six steps may be necessary:

- 1) Transfer the dates of live births from the birth history to Column (1) of the calendar
- 2) Record the months of pregnancy (P) in Column (1) for any pregnancies terminating in live births (B) and nonlive births (T)
- 3) Record the months of contraceptive use and nonuse in Column (1).
- 4) Record whether an ultrasound test was performed for each pregnancy in Column (2) in the month of birth, the month of pregnancy termination or the month of interview (for current pregnancies).
- 5) Record information on the woman's marriage(s) in Column (3).
- 6) Record the reason for discontinuation of contraceptive use for every period of use terminated prior to the interview date in Column (4) in the last month of use.

For each example, we assume that the respondent knows the dates of birth of her children and also the dates during which she used contraception. During actual fieldwork, you may need to probe to correct errors in the reporting of this information.

Case #1

Scenario: The respondent was interviewed in January 2006. She has had two births since April 2001. The first was Jamil, born in September, 2001, and the second was Prasad, born in February, 2004. The dates of birth of the children are obtained from Q. 215 in the birth history. The woman did not have any other pregnancies and has never used contraception. She did not have an ultrasound test during either of her pregnancies. She is married to her first husband. They were married in March 2001 (gauna was performed at the time of marriage).

STEP 1

The first step is to record the birth dates for Jamil and Prasad. Record 'B' in the month of birth of each of the children and write the child's name to the left of the 'B' in Column (1) in the month corresponding to the child's birth date.

Step 1

WOMAN'S RESPONSE		NUMBER OF MONTHS	ENTRY IN COLUMN (1) IN CALENDAR	
EVENT	DATE		MONTHS	CODE
Jamil	December 2001	1	DEC 2001	B
Prasad	February 2004	1	FEB 2004	B

STEP 2

The second step involves entering a 'P' in each of the months of pregnancy prior to the month in which each live birth occurred. For Jamil, the pregnancy extends from April 2001 to November 2001 (8 months plus one additional month for the month of birth), while for Prasad it is from June 2003 to January 2004 (8 months plus one additional month for the month of birth).

Step 2

WOMAN'S RESPONSE		NUMBER OF MONTHS	ENTRY IN COLUMN (1) IN CALENDAR	
EVENT	DATE		MONTHS	CODE
Pregnant	April-November 2001	8	APR-NOV 2001	P
Birth (Jamil)	December 2001	1	DEC 2001	B
Pregnant	June 2003-January 2004	8	JUNE 2003-JAN 2004	P
Prasad	February 2004	1	FEB 2004	B

STEP 3

The respondent did not use contraception during the calendar period. Thus, in Column (1) in the calendar, you will fill in the rest of the boxes with '0's to show the periods of non-use.

Step 3

WOMAN'S RESPONSE		NUMBER OF MONTHS	ENTRY IN COLUMN (1) IN CALENDAR	
EVENT	DATE		MONTHS	CODE
Nonuse	January 2001-March 2001	3	JAN-MAR 2001	0
Pregnant	April-November 2001	8	APR-NOV 2001	P
Birth (Jamil)	December 2001	1	DEC 2001	B
Nonuse	January 2002-May 2003	17	JAN 2002-MAY 2003	0
Pregnant	June 2003-January 2004	8	JUNE 2003-JAN 2004	P
Birth (Prasad)	February 2004	1	FEB 2004	B

STEP 4

In Column (2), enter code 'N' in the month of Jamil's birth (December 2001) and the month of Prasad's birth (February 2004) to indicate that the respondent did not receive an ultrasound test during either of these pregnancies.

STEP 5

The respondent has been married to her first husband since March 2001. In Column (3), an '0' is placed in the months of Jan and Feb 2001. An 'X' is placed in the month of Mar 2001 and in the month of interview (April 2006). A squiggly line is used to connect the X's.

STEP 5

EVENT	WOMAN'S RESPONSE		NUMBER OF MONTHS	ENTRY IN COLUMN (4) IN CALENDAR MONTHS	
	DATE			MONTHS	CODE
Not married	Jan-Feb 2001		2	JAN-FEB 2001	
Marriage	March 2001		62	MAR 2001-APR 2006	X

STEP 6

Column (4) will be left blank because the woman did not use any contraception during the calendar period.

INSTRUCTIONS: CASE #1

ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
FOR COLUMNS 1 AND 3, ALL MONTHS SHOULD BE FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL. 1: BIRTHS, PREGNANCIES, CONTRACEPTIVE USE

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 FEMALE STERILIZATION
- 2 MALE STERILIZATION
- 3 PILL
- 4 IUD/LOOP
- 5 INJECTABLES
- 6 IMPLANTS
- 7 CONDOM/NIRODH
- 8 FEMALE CONDOM
- 9 DIAPHRAGM
- J FOAM OR JELLY
- L RHYTHM METHOD
- M WITHDRAWAL
- X OTHER _____

(SPECIFY)

COL. 2: ULTRASOUND CONDUCTED DURING PREGNANCY

- Y YES
- N NO

COL. 3: MARRIAGE

- X MARRIED
- N MARRIED, GAUNA NOT PERFORMED
- 0 NOT MARRIED

COL. 4: DISCONTINUATION OF CONTRACEPTIVE USE

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 METHOD FAILED/BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND/PARTNER DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS/PROBLEMS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COSTS TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSAL
- D MARITAL DISSOLUTION/SEPARATION
- L LACK OF SEXUAL SATISFACTION
- M CREATED MENSTRUAL PROBLEM
- G GAINED WEIGHT
- N DID NOT LIKE METHOD
- P LACK OF PRIVACY FOR USE
- X OTHER _____

(SPECIFY)

- Z DON'T KNOW

			1	2	3	4				
	12	DEC 01						01	DEC	
	11	NOV 02						02	NOV	
	10	OCT 03						03	OCT	
	09	SEP 04						04	SEP	
2	08	AUG 05						05	AUG	2
0	07	JUL 06						06	JUL	0
	06	JUN 07						07	JUN	0
6	05	MAY 08						08	MAY	6
	04	APR 09	0		X			09	APR	
	03	MAR 10						10	MAR	
	02	FEB 11						11	FEB	
	01	JAN 12						12	JAN	
<hr/>										
	12	DEC 13						13	DEC	
	11	NOV 14						14	NOV	
	10	OCT 15						15	OCT	
	09	SEP 16						16	SEP	
2	08	AUG 17						17	AUG	2
0	07	JUL 18						18	JUL	0
	06	JUN 19						19	JUN	0
5	05	MAY 20						20	MAY	5
	04	APR 21						21	APR	
	03	MAR 22						22	MAR	
	02	FEB 23						23	FEB	
	01	JAN 24						24	JAN	
<hr/>										
	12	DEC 25						25	DEC	
	11	NOV 26						26	NOV	
	10	OCT 27						27	OCT	
	09	SEP 28						28	SEP	
2	08	AUG 29						29	AUG	2
0	07	JUL 30						30	JUL	0
	06	JUN 31						31	JUN	0
4	05	MAY 32						32	MAY	4
	04	APR 33						33	APR	
	03	MAR 34	0					34	MAR	
Prasad	02	FEB 35	B	N				35	FEB	
	01	JAN 36	P					36	JAN	
<hr/>										
	12	DEC 37						37	DEC	
	11	NOV 38						38	NOV	
	10	OCT 39						39	OCT	
	09	SEP 40						40	SEP	
2	08	AUG 41						41	AUG	2
0	07	JUL 42						42	JUL	0
	06	JUN 43	P					43	JUN	0
3	05	MAY 44	0					44	MAY	3
	04	APR 45						45	APR	
	03	MAR 46						46	MAR	
	02	FEB 47						47	FEB	
	01	JAN 48						48	JAN	
<hr/>										
	12	DEC 49						49	DEC	
	11	NOV 50						50	NOV	
	10	OCT 51						51	OCT	
	09	SEP 52						52	SEP	
2	08	AUG 53						53	AUG	2
0	07	JUL 54						54	JUL	0
	06	JUN 55						55	JUN	0
2	05	MAY 56						56	MAY	2
	04	APR 57						57	APR	
	03	MAR 58						58	MAR	
	02	FEB 59						59	FEB	
	01	JAN 60	0					60	JAN	
Jamil	12	DEC 61	B	N				61	DEC	
	11	NOV 62	P					62	NOV	
	10	OCT 63						63	OCT	
	09	SEP 64						64	SEP	
2	08	AUG 65						65	AUG	2
0	07	JUL 66						66	JUL	0
	06	JUN 67						67	JUN	0
1	05	MAY 68						68	MAY	1
	04	APR 69	P					69	APR	
	03	MAR 70	0		X			70	MAR	
	02	FEB 71	0		0			71	FEB	
	01	JAN 72	0		0			72	JAN	

CASE #2

This respondent was interviewed in May 2006. She had two live births since January 2001; the first (in June 2001) resulted in twins but only one was born alive (Priya), while the other was a stillbirth. The respondent did not have an ultrasound test during the pregnancy. Priya's younger brother, Samir, was born in February 2003 in the ninth month of pregnancy. The respondent had an ultrasound during the pregnancy with Samir. Note that since the first of these pregnancies began before January 2000, only five months of pregnancy are indicated in the first column. Also note that the stillbirth is not recorded as a pregnancy termination, because it involved a pregnancy that resulted in a live birth (Priya), and you may place only one code in a box.

The respondent's first contraceptive use during the period (the pill) began nine months after the last birth. She used the pill for six months and then switched to the IUD soon afterwards. She stopped using the pill because it was too expensive. She used the IUD until September 2004, when she separated from her husband. She has not used any contraception since.

The respondent had been married from before January 2000 until her separation in September 2004.

INSTRUCTIONS: CASE #2

ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
FOR COLUMNS 1 AND 3, ALL MONTHS SHOULD BE FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL. 1: BIRTHS, PREGNANCIES, CONTRACEPTIVE USE

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS
- 0 NO METHOD
- 1 FEMALE STERILIZATION
- 2 MALE STERILIZATION
- 3 PILL
- 4 IUD/LOOP
- 5 INJECTABLES
- 6 IMPLANTS
- 7 CONDOM/NIRODH
- 8 FEMALE CONDOM
- 9 DIAPHRAGM
- J FOAM OR JELLY
- L RHYTHM METHOD
- M WITHDRAWAL
- X OTHER _____

(SPECIFY)

COL.2: ULTRASOUND CONDUCTED DURING PREGNANCY

- Y YES
- N NO

COL. 3: MARRIAGE

- X MARRIED
- N MARRIED, GAUNA NOT PERFORMED
- 0 NOT MARRIED

COL. 4: DISCONTINUATION OF CONTRACEPTIVE USE

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 METHOD FAILED/BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND/PARTNER DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS/PROBLEMS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COSTS TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSAL
- D MARITAL DISSOLUTION/SEPARATION
- L LACK OF SEXUAL SATISFACTION
- M CREATED MENSTRUAL PROBLEM
- G GAINED WEIGHT
- N DID NOT LIKE METHOD
- P LACK OF PRIVACY FOR USE
- X OTHER _____

(SPECIFY)

- Z DON'T KNOW

			1	2	3	4			
12	DEC	01					01	DEC	
11	NOV	02					02	NOV	
10	OCT	03					03	OCT	
09	SEP	04					04	SEP	
2	08	AUG	05				05	AUG	2
0	07	JUL	06				06	JUL	0
0	06	JUN	07				07	JUN	0
6	05	MAY	08	0		0	08	MAY	6
	04	APR	09				09	APR	
	03	MAR	10				10	MAR	
	02	FEB	11				11	FEB	
	01	JAN	12				12	JAN	
12	DEC	13					13	DEC	
11	NOV	14					14	NOV	
10	OCT	15					15	OCT	
09	SEP	16					16	SEP	
2	08	AUG	17				17	AUG	2
0	07	JUL	18				18	JUL	0
0	06	JUN	19				19	JUN	0
5	05	MAY	20				20	MAY	5
	04	APR	21				21	APR	
	03	MAR	22				22	MAR	
	02	FEB	23				23	FEB	
	01	JAN	24				24	JAN	
12	DEC	25					25	DEC	
11	NOV	26					26	NOV	
10	OCT	27					27	OCT	
09	SEP	28	0		0		28	SEP	
2	08	AUG	29	4		X D	29	AUG	2
0	07	JUL	30				30	JUL	0
0	06	JUN	31				31	JUN	0
4	05	MAY	32	4			32	MAY	4
	04	APR	33	3		8	33	APR	
	03	MAR	34				34	MAR	
	02	FEB	35				35	FEB	
	01	JAN	36				36	JAN	
12	DEC	37					37	DEC	
11	NOV	38	3				38	NOV	
10	OCT	39	0				39	OCT	
09	SEP	40					40	SEP	
2	08	AUG	41				41	AUG	2
0	07	JUL	42				42	JUL	0
0	06	JUN	43				43	JUN	0
3	05	MAY	44				44	MAY	3
	04	APR	45				45	APR	
	03	MAR	46	0			46	MAR	
	02	FEB	47	B	Y		47	FEB	
	01	JAN	48	P			48	JAN	
12	DEC	49					49	DEC	
11	NOV	50					50	NOV	
10	OCT	51					51	OCT	
09	SEP	52					52	SEP	
2	08	AUG	53				53	AUG	2
0	07	JUL	54				54	JUL	0
0	06	JUN	55	P			55	JUN	0
2	05	MAY	56	0			56	MAY	2
	04	APR	57				57	APR	
	03	MAR	58				58	MAR	
	02	FEB	59				59	FEB	
	01	JAN	60				60	JAN	
12	DEC	61					61	DEC	
11	NOV	62					62	NOV	
10	OCT	63					63	OCT	
09	SEP	64					64	SEP	
2	08	AUG	65				65	AUG	2
0	07	JUL	66	0			66	JUL	0
0	06	JUN	67	B	N		67	JUN	0
1	05	MAY	68	P			68	MAY	1
	04	APR	69				69	APR	
	03	MAR	70				70	MAR	
	02	FEB	71				71	FEB	
	01	JAN	72	P		X	72	JAN	

Priya

VIII. MAN'S QUESTIONNAIRE

A. INTRODUCTION

The Man's Questionnaire consists of eight sections as follows:

- Section 1: Respondent's Background
- Section 2: Reproduction
- Section 3: Contraception and Male Involvement
- Section 4: Marriage and Sexual Life
- Section 5: Fertility Preferences
- Section 6: Selected Health and Nutrition Issues
- Section 7: Attitudes Towards Gender Roles
- Section 8: HIV/AIDS and Other Sexually Transmitted Infections.

Most of the questions in the Man's Questionnaire are similar to those we have already discussed in the Woman's Questionnaire, although in most cases, the questions appear in a different place and have different question numbers. For example, although the HIV/AIDS questions are almost identical, they are in Section 9 in the Woman's Questionnaire and Section 8 in the Man's Questionnaire.

This section of the manual covers only those questions that are unique to the Man's Questionnaire.

B. QUESTIONS ONLY IN THE MAN'S QUESTIONNAIRE

SECTION 1. RESPONDENT'S BACKGROUND

Qs. 104 and 105: TRAVEL AWAY FROM HOME

Both of these questions pertain to the previous 12 months. The travel we are referring to is travel outside the respondent's community. If the respondent went to visit his brother who lives in the same village and he decided to sleep there for the night, we would not include this as a trip. Q. 104 will not be the number of nights slept away, but rather the number of trips made away from the home community and back. For example, if the only trip the respondent made was to travel to work in the capital city for three months and then returned home, you would record '01' trips. Then Q. 105 would be YES for this case because the one trip was longer than 30 days.

SECTION 2: REPRODUCTION

Qs. 201-207: CHILDREN

These questions are worded slightly differently from those in the Woman's Questionnaire. As with women, we are only interested in the biological children that the man has had. It is easier to ask women how many children they have given birth to, but for men, it is important to stress that it is their biological children (children they have fathered) we are interested in.

Q. 208 PROBE FOR OTHER CHILDREN

Since many children live away from their fathers, particularly if their mother was not married to the father, this extra probe has been added.

Qs. 211-212: NUMBER OF WOMEN WITH WHOM MAN HAS HAD CHILDREN

A man can have children with more than one woman. For example, if the respondent has been married twice, he may have had some children with the first wife and some with the second. A man may also have had children with his wife and with another woman that he was never married to.

Qs. 213 and 214: AGE AT FIRST BIRTH

If the man has more than one child, when asking the question use the word 'first' before the word 'child' in Q. 213 and the word 'youngest' in Q. 214. Enter age in completed years.

SECTION 3. CONTRACEPTION AND MALE INVOLVEMENT

Qs. 313-316: ATTITUDES TOWARDS CONTRACEPTION

It is often believed that a breastfeeding woman cannot become pregnant. Q. 313 assesses men's knowledge about this. If a respondent says that in some circumstances it is true (for example if the child is being exclusively breastfed and is less than 6 months of age) and in others it is not true, circle code '3' for DEPENDS. Q. 314 assess the man's attitudes towards taking responsibility for contraception and about the effect of contraceptive use on a woman's behaviour. Be sure to circle a response for each of the two questions. The word "promiscuous" means that someone has sexual relations with many people. Q. 316 probes a man's knowledge of the effectiveness of condoms.

Qs. 327-330: INVOLVEMENT IN ANTENATAL CARE

In these questions, we first find out the name of the man's youngest child if he has a child who is currently between the ages of 0 and 3. In Q. 327, if the child is living in the same household as the respondent, enter the child's line number from the household schedule. If the child is living elsewhere, enter '00'

Then ask Qs. 328 and 329 with reference to the time when the mother of the child was pregnant with this child. By present during an antenatal check-up, we mean whether he was ever there with the mother for any part of the antenatal check-up. If the respondent says he used to just drop off his wife at the sub-centre, probe to find out if he was ever there at any time during a check.

If the mother of the child did not have any antenatal care, ask Q. 330 to find out the main reason.

Qs. 331-337: Maternal and child health related questions

All these questions have similar counterparts in the Woman's Questionnaire. The major difference lies in the fact that we are asking about men's involvement and knowledge in maternal and child health. These questions are with regard to the respondent's youngest child.

SECTION 4: MARRIAGE AND SEXUAL LIFE

Qs. 402 and 403: NUMBER OF WIVES

A man could potentially have more than one wife. In Q. 402 enter his current number of wives. In Q. 403 you should fill in the names and line numbers for all the man's wives. The number of names should be equal to the number in Q. 402. This question is important because it allows us to link up couples. If a wife is not listed in the Household Questionnaire, write '00' in the boxes next to her name. This can happen if you are interviewing a man who is visiting a household, but his wife stayed at home or if he is interviewed at his home but his wife does not live with him.

Qs. 420-428: SEX WITH MULTIPLE PARTNERS IN THE LAST 12 MONTHS

This set of questions is also in the Woman's Questionnaire. However, women are asked only about up to two partners, whereas men are asked these questions for up to three partners. Ask the questions for the last sexual partner, then for a second partner if the respondent had a second partner, and finally, if he had a third partner, ask about this third partner. You must go through all the questions for each partner before going on to the next partner. Be sure that the respondent is never confused about which partner you are referring to.

Q. 430-433: QUESTIONS ABOUT COMMERCIAL SEX

These questions specifically ask about commercial sex and condom use during commercial sex in the past 12 months. If the respondent reports that he did have commercial sex (i.e., he paid someone to have sex) in the last 12 months, then he is asked if a condom was used the last time he did this and, if yes, whether a condom was used each time he had commercial sex in the last 12 months. If a respondent mentioned in Q. 423 that a partner was a commercial sex worker, he is not asked these questions.

Qs. 436-444: FAMILY PLANNING USE AT THE TIME OF LAST SEX

For the last time that the respondent had sex, we want to know whether any method was used to avoid pregnancy. These questions are similar to the questions about current contraceptive use asked for women. However, for men they refer to contraceptive use at last sex only. In Q. 441, men who said they used a condom at last sex are asked if they did this to avoid pregnancy or to avoid a sexually transmitted infection. This is a multiple response question because they could have used a condom for both reasons or for some other reason.

If the respondent is not sterilized, he is then asked whether he or his partner used any contraceptive method the last time he had sex, and if yes which method was used. In Q. 443, insert the phrase 'other than a condom' for those men who reported condom use at last sex. In Q. 444, probe to get all the methods used.

SECTION 5: FERTILITY PREFERENCES

Almost all the questions in this section are the same as those in Section 7 of the Woman's Questionnaire. However, for men we have to first determine whether they have one wife or more than one wife (Q. 502) in order to know how to ask Q. 504. For men who have more than one wife who is pregnant, Q. 504 should use the words 'children' and 'wives.'

SECTION 6: SELECTED HEALTH AND NUTRITION ISSUES

All the questions in this section are similar to question in the Woman's Questionnaire.

SECTION 7: ATTITUDES TOWARDS GENDER ROLES

This section contains several multi-part questions about attitudes towards gender roles. They range from whether the respondent feels that wives or husbands should have the final say in certain decisions to women's sexual rights. Remember, if the respondent asks you for your opinion, tell him that your opinion is irrelevant and that what we want to know is how he feels. Some of these questions, but not all, are asked from women too. Qs. 708-710 are for men who have at least one wife who is employed and earns cash.

SECTION 8: HIV/AIDS AND OTHER SEXUALLY TRANSMITTED INFECTIONS

This section is the same as Section 9 in the Woman's Questionnaire except for Q. 827 on male

circumcision and a different wording on Qs. 832-833 on symptoms of sexually transmitted diseases.

Q. 827: MALE CIRCUMCISION

Male circumcision involves the surgical removal of the foreskin of the penis. Circumcision may be done for religious or medical reasons and can be performed in infancy or later in life. If a respondent does not know what circumcision is or says that he does not know that he is circumcised, circle the DON'T KNOW code.

APPENDIX A: HINDU AND MUSLIM CALENDARS/FESTIVALS

TABLE 1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS

Gregorian	Seasonal	2006		2005	
		Month	Dates	Month	Dates
January	PAUSH	ZILHAJ	1-30	ZIQAD	19-29
		MUHARAM	1	ZILHAJ	1-20
February	MAGH	MUHARAM	2-29	ZILHAJ	21-29
				MUHARAM	1-19
March	PHAGUN	SAFAR	1-30	MUHARAM	20-30
		RB AWAL	1	SAFAR	1-20
April	CHAIT	RB AWAL	2-29	SAFAR	21-30
		RB SANI	1-2	RB AWAL	1-21
May	BAISAKH	RB SANI	3-29	RB AWAL	22-30
		JM AWAL	1-4	RB SANI	1-22
June	JETH	JM AWAL	5-30	RB SANI	23-29
		JM SANI	1-4	JM AWAL	1-23
July	ASHADH	JM SANI	5-30	JM AWAL	24-30
		RAJAB	1-5	JM SANI	1-24
August	SAWAN	RAJAB	6-29	JM SANI	25-29
		SHABAN	1-7	RAJAB	1-26
September	BHADON	SHABAN	8-30	RAJAB	27-30
		RAMZAN	1-7	SHABAN	1-26
October	ASHVIN	RAMZAN	8-30	SHABAN	27-30
		SHAWAL	1-8	RAMZAN	1-27
November	KARTIK	SHAWAL	9-30	RAMZAN	28-29
		ZIQAD	1-8	SHAWAL	1-28
December	MAG-SHIRSH	ZIQAD	9-29	SHAWAL	29-30
		ZILHAJ	1-10	ZIQAD	1-29

TABLE 1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS (CONTD.)

Gregorian	Seasonal	2004		2003		2002		2001		2000		1999	
		Month	Dates	Month	Dates	Month	Dates	Month	Dates	Months	Dates	Months	Dates
January	PAUSH	ZIQAD ZILHAJ	8-29 1-9	SHAWAL ZIQAD	27-29 1-28	SHAWAL ZIQAD	17-30 1-17	SHAWAL ZIQAD	6-30 1-6	RAMZAN SHAWAL	24-30 1-24	RAMZAN SHAWAL	13-30 1-13
February	MAGH	ZILHAJ MUHARAM	10-30 1-8	ZIQAD ZILHAJ	29-30 1-26	ZIQAD ZILHAJ	18-30 1-15	ZIQAD ZILHAJ	7-30 1-4	SHAWAL ZIQAD	25-30 1-23	SHAWAL ZIQAD	14-30 1-11
March	PHAGUN	MUHARAM SAFAR	9-29 1-10	ZILHAJ MUHARAM	27-29 1-28	ZILHAJ MUHARAM	16-29 1-17	ZILHAJ MUHARAM	5-29 1-6	ZIQAD ZILHAJ	24-29 1-24	ZIQAD ZILHAJ	12-29 1-13
April	CHAIT	SAFAR RB AWAL	11-30 1-10	MUHARAM SAFAR	29-30 1-28	MUHARAM SAFAR	18-30 1-17	MUHARAM SAFAR	7-30 1-6	ZILHAJ MUHARAM	25-29 1-25	ZILHAJ MUHARAM	14-30 1-13
May	BAISAKH	RB AWAL RB SANI	11-29 1-12	SAFAR RB AWAL	29-30 3-29	SAFAR RB AWAL	18-30 1-18	SAFAR RB AWAL	7-29 1-8	MUHARAM SAFAR	26-29 1-27	MUHARAM SAFAR	14-29 1-15
June	JETH	RB SANI JM AWAL	13-30 1-12	RB AWAL RB SANI	1-2 3-30	RB AWAL RB SANI	19-29 1-19	RB AWAL RB SANI	9-30 1-8	SAFAR RB AWAL	28-30 1-27	SAFAR RB AWAL	16-29 1-16
July	ASHADH	JM AWAL JM SANI	13-30 1-13	JM AWAL JM SANI	1-29 1-2	RB SANI JM AWAL	20-30 1-20	RB SANI JM AWAL	9-29 1-10	RB AWAL RB SANI	28-29 1-29	RB AWAL RB SANI	17-29 1-18
August	SAWAN	JM SANI RAJAB	14-29 1-15	JM SANI RAJAB	3-30 1-3	JM AWAL JM SANI	21-29 1-22	JM AWAL JM SANI	11-29 1-12	JM AWAL JM SANI	1-30 1	RB SANI JM AWAL	19-30 1-19
September	BHADON	RAJAB SHABAN	16-30 1-15	RAJAB SHABAN	4-29 1-4	JM SANI RAJAB	23-29 1-23	JM SANI RAJAB	13-30 1-12	JM SANI RAJAB	2-29 1-2	JM AWAL JM SANI	20-29 1-20
October	ASHVIN	SHABAN RAMZAN	16-30 1-16	SHABAN RAMZAN	5-30 1-5	RAJAB SHABAN	24-30 1-24	RAJAB SHABAN	13-29 1-14	RAJAB SHABAN	3-30 1-3	JM SANI RAJAB	21-30 1-21
November	KARTIK	RAMZAN SHAWAL	17-29 1-17	RAMZAN SHAWAL	6-29 1-6	SHABAN RAMZAN	25-29 1-25	SHABAN RAMZAN	15-30 1-14	SHABAN RAMZAN	4-29 1-4	RAJAB SHABAN	22-30 1-21
December	MAG-SHIRSH	SHAWAL ZIQAD	18-30 1-18	SHAWAL ZIQAD	7-30 1-7	RAMZAN SHAWAL	26-30 1-26	RAMZAN SHAWAL	15-29 1-16	RAMZAN SHAWAL	5-30 1-5	SHABAN RAMZAN	22-29 1-23

TABLE1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS (CONTD.)

Gregorian	Seasonal	1998		1997		1996		1995		1994		1993	
		Month	Dates	Month	Dates	Month	Dates	Month	Dates	Months	Dates	Months	Dates
January	PAUSH	RAMZAN SHAWAL	1-29 1-2	SHABAN RAMZAN	21-29 1-21	SHABAN RAMZAN	15-29 1-10	SHABAN RAMZAN	3-30 1-4	RAJAB SHABAN	19-29 1-20	RAJAB SHABAN	5-29 1-7
February	MAGH	SHAWAL ZIQAD	3-29 1	RAMZAN SHAWAL	22-29 1-20	RAMZAN SHAWAL	11-30 1-9	RAMZAN SHAWAL	5-29 1-3	SHABAN RAMZAN	21-30 1-18	SHABAN RAMZAN	8-30 1-5
March	PHAGUN	ZIQAD ZILHAJ	2-30 1-2	SHAWAL ZIQAD	21-30 1-21	SHAWAL ZIQAD	10-29 1-11	SHAWAL ZIQAD	4-30 1-4	RAMZAN SHAWAL	19-29 1-20	RAMZAN SHAWAL	6-29 1-7
April	CHAIT	ZILHAJ MUHARAM	3-29 1-3	ZIQAD ZILHAJ	22-30 1-21	ZIQAD ZILHAJ	12-30 1-11	ZIQAD ZILHAJ	5-29 1-5	SHAWAL ZIQAD	21-30 1-20	SHAWAL ZIQAD	8-30 1-7
May	BAISAKH	MUHARAM SAFAR	4-30 1-4	ZILHAJ MUHARAM	22-29 1-23	ZILHAJ MUHARAM	12-29 1-13	ZILHAJ MUHARAM	6-30 1-6	ZIQAD ZILHAJ	21-29 1-22	ZIQAD ZILHAJ	8-29 1-9
June	JETH	SAFAR RB SANI	5-29 1-5	MUHARAM SAFAR	24-30 1-23	MUHARAM SAFAR	14-30 1-13	MUHARAM SAFAR	7-29 1-7	ZILHAJ MUHARAM	23-29 1-22	ZILHAJ MUHARAM	10-30 1-11
July	ASHADH	RB AWAL RB SANI	6-30 1-6	SAFAR RB AWAL	24-29 1-25	SAFAR RB AWAL	14-30 1-14	SAFAR AWAL	8-30 1-8	MUHARAM SAFAR	23-29 1-24	MUHARAM SAFAR	12-29 1-13
August	SAWAN	RB SANI JM AWAL	7-29 1-8	RB AWAL RB SANI	26-30 1-26	RB AWAL RB SANI	15-30 1-15	RB AWAL RB SANI	9-29 1-10	SAFAR RB AWAL	25-30 1-25	SAFAR RB AWAL	14-30 1-14
September	BHADON	JM AWAL JM SANI	9-30 1-8	RB SANI JM AWAL	27-29 1-27	RB SANI JM AWAL	16-29 1-16	RB SANI JM AWAL	11-30 1-10	RB AWAL RB SANI	26-29 1-27	RB AWAL RB SANI	15-29 1-15
October	ASHVIN	JM SANI RAJAB	11-30 1-10	JM AWAL JM SANI	28-30 1-28	JM AWAL JM SANI	17-30 1-17	JM AWAL JM SANI	11-29 1-12	RB SANI JM AWAL	28-30 1-29	RB SANI JM AWAL	16-30 1-16
November	KARTIK	RAJAB SHABAN	11-30 1-10	JM SANI RAJAB	29-30 1-28	JM SANI RAJAB	18-29 1-18	JM SANI RAJAB	13-30 1-12	JM SANI	1-30	JM AWAL JM SANI	17-29 1-17
December	MAG- SHIRSH	SHABAN RAMZAN	11-29 1-12	RAJAB SHABAN	29 1-30	RAJAB SHABAN	19-29 1-20	RAJAB SHABANS	13-29 1-14	RAJAB SHABAN	1-29 1-2	JM SANI RAJAB	18-30 1-18

TABLE 1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS (CONTD.)

Gregorian	Seasonal	1992		1991		1990		1989		1988		1987	
		Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates
January	PAUSH	JM SANI RAJAB	25-30 1-25	JM SANI RAJAB	16-30 1-16	JM SANI RAJAB	3-30 1-3	JM AWAL JM SANI	23-30 1-23	JM AWAL JM SANI	12-30 1-12	RB SANI JM AWAL	30 1-29
February	MAGH	RAJAB SHABAN	26-29 1-24	RAJAB SHABAN	17-29 1-15	RAJAB SHABAN	4-29 1-2	JM SANI RAJAB	24-29 1-22	JM SANI RAJAB	13-30 1-12	JM SANI	2-29
March	PHAGUN	SHABAN RAMZAN	25-30 1-25	SHABAN RAMZAN	16-30 1-15	SHABAN RAMZAN	3-29 1-4	RAJAB SHABAN	23-30 1-23	RAJAB SHABAN	13-30 1-13	JM SANI RAJAB	30 1-29
April	CHAIT	RAMZAN SHAWAL	26-29 1-25	RAMZAN SHAWAL	16-29 1-17	RAMZAN SHAWAL	5-30 1-4	SHABAN RAMZAN	24-30 1-23	SHABAN RAMZAN	14-30 1-14	SHABAN RAMZAN	2-30 1
May	BAISAKH	SHAWAL ZIQAD	26-30 1-26	SHAWAL ZIQAD	18-30 1-18	SHAWAL ZIQAD	5-29 1-6	RAMZAN SHAWAL	24-29 1-25	RAMZAN SHAWAL	15-30 1-15	RAMZAN SHAWAL	2-30 1-2
June	JETH	ZIQAD ZILHAJ	27-29 1-27	ZIQAD ZILHAJ	19-29 1-19	ZIQAD ZILHAJ	7-30 1-6	SHAWAL ZIQAD	26-30 1-25	SHAWAL ZIQAD	16-29 1-16	SHAWAL ZIQAD	3-29 1-3
July	ASHADH	ZILHAJ MUHARAM	28-30 1-28	ZILHAJ MUHARAM	20-30 1-20	ZILHAJ MUHARAM	7-29 1-8	ZIQAD ZILHAJ	26-29 1-27	ZIQAD ZILHAJ	17-30 1-17	ZIQAD ZILHAJ	4-30 1-4
August	SAWAN	MUHARAM SAFAR	29 1-30	MUHARAM SAFAR	21-29 1-22	MUHARAM SAFAR	9-29 1-10	ZILHAJ MUHARAM	28-30 1-28	ZILHAJ MUHARAM	18-30 1-18	ZILHAJ MUHARAM	5-29 1-6
September	BHADON	RB AWAL RB SANI	1-29 1-1	SAFAR RB AWAL	23-30 1-22	SAFAR RB AWAL	11-30 1-10	MUHARAM SAFAR	29 1-29	MUHARAM SAFAR	19-29 1-19	MUHARAM SAFAR	7-29 1-7
October	ASHVIN	RB SANI JM AWAL	2-30 1-2	RB AWAL RB SANI	23-29 1-23	RB AWAL RB SANI	11-30 1-11	SAFAR RB AWAL	30 1-30	SAFAR RB AWAL	20-30 1-20	SAFAR RB AWAL	8-30 1-8
November	KARTIK	JM AWAL JM SANI	3-29 1-3	RB SANI JM AWAL	24-30 1-22	RB SANI JM AWAL	12-30 1-11	RB SANI	1-30	RB AWAL RB SANI	21-30 1-20	RB AWAL RB SANI	9-29 1-9
December	MAG- SHIRSH	JM SANI RAJAB	4-30 1-4	JM AWAL JM SANI	23-29 1-24	JM AWAL JM SANI	12-29 1-11	JM AWAL JM SANI	1-29 1-2	JM SANI JM AWAL	21-29 1-22	JM SANI JM AWAL	10-29 1-11

TABLE 1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS (CONTD.)

Gregorian	Seasonal	1986		1985		1984		1983		1982		1981	
		Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates
January	PAUSH	RB SANI JM AWAL	19-29 1-20	RB SANI JM AWAL	8-29 1-9	RB AWAL RB SANI	26-30 1-26	RB AWAL RB SANI	16-30 1-16	RB AWAL RB SANI	5-30 1-5	SAFAR RB AWAL	23-29 1-24
February	MAGH	JM AWAL JM SANI	21-30 1-18	JM AWAL JM SANI	10-30 1-7	RB SANI JM AWAL	27-29 1-26	RB SANI JM AWAL	17-29 1-15	RB SANI JM AWAL	6-29 1-4	RB AWAL RB SANI	25-30 1-22
March	PHAGUN	JM SANI RAJAB	19-29 1-20	JM SANI RAJAB	8-29 1-9	JM AWAL JM SANI	27-30 1-27	JM AWAL JM SANI	16-30 1-16	JM AWAL JM SANI	5-30 1-5	RB SANI JM AWAL	23-29 1-24
April	CHAIT	RAJAB SHABAN	21-29 1-21	RAJAB SHABAN	10-30 1-9	JM SANI RAJAB	28-29 1-28	JM SANI RAJAB	17-29 1-17	JM SANI RAJAB	6-29 1-6	JM AWAL JM SANI	25-30 1-24
May	BAISAKH	SHABAN RAMZAN	22-30 1-22	SHABAN RAMZAN	10-29 1-11	RAJAB SHABAN	29-30 1-29	RAJAB SHABAN	18-30 1-18	RAJAB SHABAN	7-30 1-7	JM SANI RAJAB	25-29 1-26
June	JETH	RAMZAN SHAWAL	23-30 1-22	RAMZAN SHAWAL	12-30 1-11	RAMZAN	1-30	SHABAN RAMZAN	19-29 1-19	SHABAN RAMZAN	8-29 1-8	RAJAB SHABAN	27-29 2-26
July	ASHADH	SHAWAL ZIQAD	23-29 1-24	SHAWAL ZIQAD	12-29 1-13	SHAWAL ZIQAD	1-29 1-3	RAMZAN SHAWAL	20-30 1-20	RAMZAN SHAWAL	9-30 1-9	SHABAN RAMZAN	27-29 1-28
August	SAWAN	ZIQAD ZILHAJ	25-30 1-25	ZIQAD ZILHAJ	14-30 1-14	ZIQAD ZILHAJ	3-30 1-2	SHAWAL ZIQAD	21-29 1-22	SHAWAL ZIQAD	10-29 1-11	RAMZAN SHAWAL	29-30 1-29
September	BHADON	ZILHAJ MUHARAM	26-30 1-25	ZILHAJ MUHARAM	15-29 1-15	ZILHAJ MUHARAM	4-29 1-4	ZIQAD ZILHAJ	23-30 1-22	ZIQAD ZILHAJ	12-30 1-11	ZIQAD	1-29
October	ASHVIN	MUHARAM SAFAR	26-30 1-26	MUHARAM SAFAR	16-30 1-16	MUHARAM SAFAR	5-30 1-5	ZILHAJ MUHARAM	23-29 1-24	ZILHAJ MUHARAM	12-29 1-13	ZILHAJ MUHARAM	1-29 1-2
November	KARTIK	SAFAR RB AWAL	27-29 1-27	SAFAR RB AWAL	17-29 1-17	SAFAR RB AWAL	6-29 1-6	MUHARAM SAFAR	25-30 1-24	MUHARAM SAFAR	14-30 1-13	MUHARAM SAFAR	3-30 1-2
December	MAG- HIRSH	RB AWAL RB SANI	28-29 1-29	RB AWAL RB SANI	18-30 1-18	RB AWAL RB SANI	7-30 1-7	SAFAR RB AWAL	25-30 1-25	SAFAR RB AWAL	14-29 1-15	SAFAR RB AWAL	3-29 1-4

TABLE 1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS (CONTD.)

Gregorian	Seasonal	1980		1979		1978		1977		1976	
		Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates
January	PAUSH	SAFAR RB AWAL	12-30 1-12	SAFAR RB AWAL	1-29 1-2	MUHARAM SAFAR	21-30 1-21	MUHARAM SAFAR	10-30 1-10	ZILHAJ MUHARAM	28-29 1-29
February	MAGH	RB AWAL RB SANI	13-30 1-11	RB AWAL	3-30	SAFAR RB AWAL	22-30 1-19	SAFAR RB AWAL	11-29 1-9	MUHARAM SAFAR	30 1-28
March	PHAGUN	RB SANI JM AWAL	12-29 1-13	RB SANI JM AWAL	1-29 1-2	RB AWAL RB SANI	20-30 1-20	RB AWAL RB SANI	10-30 30-10	SAFAR RB AWAL	29-30 1-29
April	CHAIT	JM AWAL JM SANI	14-30 1-13	JM AWAL JM SANI	3-30 1-2	RB SANI JM AWAL	21-29 1-21	RB SANI JM AWAL	11-29 1-11	RB AWAL RB SANI	30 1-29
May	BAISAKH	JM SANI RAJAB	14-29 1-15	JM SANI RAJAB	3-29 1-4	JM AWAL JM SANI	22-30 1-22	JM AWAL JM SANI	12-29 1-13	JM AWAL JM SANI	1-30 1
June	JETH	RAJAB SHABAN	16-30 1-15	RAJAB SHABAN	5-30 1-4	JM SANI RAJAB	23-29 1-23	JM SANI RAJAB	14-30 1-13	JM SANI RAJAB	2-29 1-2
July	ASHADH	SHABAN RAMZAN	16-29 1-17	SHABAN RAMZAN	5-29 1-6	RAJAB SHABAN	24-30 1-24	RAJAB SHABAN	14-30 1-14	RAJAB SHABAN	3-30 1-3
August	SAWAN	RAMZAN SHAWAL	18-30 1-18	RAMZAN SHAWAL	7-30 1-7	SHABAN RAMZAN	25-29 1-26	SHABAN RAMZAN	15-29 1-16	SHABAN RAMZAN	4-29 1-5
September	BHADON	SHAWAL ZIQAD	19-29 1-19	SHAWAL ZIQAD	8-29 1-8	RAMZAN SHAWAL	27-30 1-26	RAMZAN SHAWAL	17-30 1-16	RAMZAN SHAWAL	6-30 1-5
October	ASHVIN	ZIQAD ZILHAJ	20-30 1-20	ZIQAD ZIHAI	9-30 1-9	SHAWAL ZIQAD	27-29 1-28	SHAWAL ZIQAD	17-29 1-18	SHAWAL ZIQAD	6-29 1-7
November	KARTIK	ZILHAJ MUHARAM	21-29 1-21	ZILHAJ MUHARAM	10-29 1-10	ZIQAD ZILHAJ	29-30 1-28	ZIQAD ZILHAJ	19-30 1-18	ZIQAD ZILHAJ	8-30 1-7
December	MAG- SHIRSH	MUHARAM SAFAR	22-30 1-22	MUHARAM SAFAR	11-30 1-11	ZILHAJ MUHARAM	29 1-30	ZILHAJ MUARRAM	19-29 1-20	ZILHAJ MUHARAM	8-29 1-9

TABLE 1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS (CONTD.)

Gregorian	Seasonal	1975		1974		1973		1972		1971	
		Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates
January	PAUSH	ZILHAJ MUHARAM	17-29 1-18	ZILHAJ MUHARAM	6-29 1-7	ZIQAD ZILHAJ	25-29 1-26	ZIQAD ZILHAJ	13-29 1-14	ZIQAD ZILHAJ	3-30 1-3
February	MAGH	MUHARAM SAFAR	19-30 1-16	MUHARAM SAFAR	8-30 1-5	ZILHAJ MUHARAM	27-30 1-24	ZILHAJ MUHARAM	15-30 1-13	ZILHAJ MUHARAM	4-29 1-2
March	PHAGUN	SAFAR RB AWAL	17-30 1-17	SAFAR RB AWAL	6-29 1-7	MUHARAM SAFAR	25-30 1-25	MUHARAM SAFAR	14-29 1-15	MUHARAM SAFAR	3-29 1-4
April	CHAIT	RB AWAL RB SANI	18-29 1-18	RB AWAL RB SANI	8-30 1-7	SAFAR RB AWAL	26-29 1-26	SAFAR RB AWAL	16-30 1-15	MUHARAM SAFAR	5-29 1-4
May	BAISAKH	RB SANI JM AWAL	19-30 1-19	RB SANI JM AWAL	8-29 1-9	RB AWAL RB SANI	27-30 1-27	RB AWAL RB SANI	16-29 1-17	RB AWAL RB SANI	5-29 1-6
June	JETH	JM AWAL JM SANI	20-30 1-19	JM AWAL JM SANI	10-30 1-9	RB SANI JM AWAL	28-29 1-28	RB SANI JM AWAL	18-29 1-18	RB SANI JM AWAL	7-30 1-6
July	ASHADH	JM SANI RAJAB	20-29 1-21	JM SANI RAJAB	10-29 1-11	JM AWAL JM SANI	29-30 1-29	JM AWAL JM SANI	19-30 1-19	JM AWAL JM SANI	7-29 1-8
August	SAWAN	RAJAB SHABAN	22-30 1-22	RAJAB SHABAN	12-30 1-12	RAJAB SHABAN	1-29 1-2	JM SANI RAJAB	20-29 1-21	JM SANI RAJAB	9-30 1-9
September	BHADON	SHABAN RAMZAN	23-29 1-23	SHABAN RAMZAN	13-29 1-13	SHABAN RAMZAN	3-30 1-2	RAJAB SHABAN	22-30 1-21	RAJAB SHABAN	10-30 1-9
October	ASHVIN	RAMZAN SHAWAL	24-30 1-24	RAMZAN SHAWAL	14-30 1-14	RAMZAN SHAWAL	3-29 1-4	SHABAN RAMZAN	22-29 1-23	SHABAN RAMZAN	10-29 1-11
November	KARTIK	SHAWAL ZIQAD	25-29 1-25	SHAWAL ZIQAD	15-29 1-15	SHAWAL ZIQAD	5-30 1-4	RAMZAN SHAWAL	24-30 1-23	RAMZAN SHAWAL	12-30 1-11
December	MAG- HIRSH	ZIQAD ZILHAJ	26-29 1-27	ZIQAD ZILHAJ	16-30 1-16	ZIQAD ZILHAJ	5-30 1-5	SHAWAL ZIQAD	24-30 1-24	SHAWAL ZIQAD	12-30 1-12

TABLE 1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS (CONTD.)

Gregorian	Seasonal	1970		1969		1968		1967		1966	
		Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates
January	PAUSH	SHAWAL ZIQAD	22-30 1-22	SHAWAL ZIQAD	11-29 1-12	RAMZAN SHAWAL	29 1-30	RAMZAN SHAWAL	19-30 1-19	RAMZAN SHAWAL	8-30 1-8
February	MAGH	ZIQAD ZILHAJ	23-29 1-21	ZIQAD ZILHAJ	13-30 1-10	ZIQAD	1-29	SHAWAL ZIQAD	20-29 1-18	SHAWAL ZIQAD	9-29 1-7
March	PHAGUN	ZILHAJ MUHARAM	22-30 1-22	ZILHAJ MUHARAM	11-29 1-12	ZILHAJ MUHARAM	1-30 1	ZIQAD ZILHAJ	19-30 1-19	ZIQAD ZILHAJ	8-30 1-8
April	CHAIT	MUHARAM SAFAR	23-29 1-23	MUHARAM SAFAR	13-30 1-12	MUHARAM SAFAR	2-30 1	ZIHAIJ MUHARAM	20-30 1-19	ZILHAJ MUHARAM	9-30 1-8
May	BAISAKH	SAFAR RB AWAL	24-30 1-24	SAFAR RB AWAL	13-29 1-14	SAFAR RB AWAL	2-29 1-3	MUHARAM SAFAR	20-30 1-20	MUHARAM SAFAR	9-29 1-10
June	JETH	RB AWAL RB SANI	25-29 1-25	RB AWAL RB SANI	15-30 1-14	RB AWAL RB SANI	4-30 1-3	SAFAR RB AWAL	21-29 1-21	SAFAR RB AWAL	11-30 1-10
July	ASHADH	RB SANI JM AWAL	26-30 1-26	RB SANI JM AWAL	15-30 1-15	RB SANI JM AWAL	4-29 1-5	RB AWAL RB SANI	22-30 1-22	RB AWAL RB SANI	11-29 1-12
August	SAWAN	JM AWAL JM SANI	27-29 1-28	JM AWAL JM SANI	16-29 1-17	JM AWAL JM SANI	6-30 1-6	RB SANI JM AWAL	23-29 1-24	RB SANI JM AWAL	13-29 1-14
September	BHADON	JM SANI RAJAB	29-30 1-28	JM SANI RAJAB	18-30 1-17	JM SANI RAJAB	7-29 1-7	JM AWAL JM SANI	25-29 1-25	JM AWAL JM SANI	15-30 1-14
October	ASHVIN	RAJAB SHABAN	29-30 1-29	RAJAB SAHBAN	18-29 1-19	RAJAB SHABAN	8-30 1-8	JM SANI RAJAB	26-30 1-26	JM SANI RAJAB	15-29 1-16
November	KARTIK	RAMZAN	1-30	SHABAN RAMZAN	20-30 1-19	SHABAN RAMZAN	9-29 1-9	RAJAB SHABAN	27-29 1-27	RAJAB SHABAN	17-30 1-16
December	MAG- SHIRSH	RAMZAN SHAWAL	1-29 1-2	RAMZAN SHAWAL	20-29 1-21	RAMZAN SHAWAL	10-30 1-10	SHABAN RAMZAN	28-30 1-28	SHABAN RAMZAN	17-29 1-18

TABLE 1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS (CONTD.)

Gregorian	Hindu	1965		1964		1963		1962		1961	
		Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates
January	PAUSH	SHABAN RAMZAN	27-30 1-27	SHABAN RAMZAN	15-30 1-15	SHABAN RAMZAN	4-30 1-4	RAJAB SHABAN	23-30 1-23	RAJAB SHABAN	12-29 1-13
February	MAGH	RAMZAN SHAWAL	28-30 1-26	RAMZAN SHAWAL	16-30 1-14	RAMZAN SHAWAL	5-29 1-3	SHABAN RAMZAN	24-29 1-22	SHABAN RAMZAN	14-29 1-12
March	PHAGUN	SHAWAL ZIQAD	26-29 1-27	SHAWAL ZIQAD	15-29 1-16	SHAWAL ZIQAD	4-29 1-5	RAMZAN SHAWAL	23-29 1-24	RAMZAN SHAWAL	13-30 1-13
April	CHAIT	ZIQAD ZULHAJ	28-30 1-27	SHAWAL ZIQAD	17-29 1-17	SHAWAL ZIQAD	6-30 1-5	SHAWAL ZIQAD	25-30 1-24	SHAWAL ZIQAD	14-29 1-14
May	BAISAKH	ZULHAZ MUHARAM	28-29 1-29	ZULHAZ MUHARAM	18-30 1-18	ZULHAZ MUHARAM	6-29 1-7	ZIQAD ZULHAZ	25-29 1-26	ZIQAD ZULHAZ	15-30 1-15
June	JETH	MUHARAM SAFAR	30 1-29	MUHARAM SAFAR	19-29 1-19	MUHARAM SAFAR	8-29 1-8	ZULHAZ MUHARAM	27-30 1-26	ZULHAZ MUHARAM	16-29 1-16
July	ASHADH	SAFAR RB AWAL	30 1-30	SAFAR RB AWAL	20-29 1-21	SAFAR RB AWAL	9-30 1-9	MUHARAM SAFAR	27-29 1-28	MUHARAM SAFAR	17-30 1-17
August	SAWAN	RB SANI JM AWAL	3-30 1-3	RB AWAL RB SANI	22-30 1-22	SAFAR RB AWAL	10-29 1-11	SAFAR RB AWAL	29-30 1-29	SAFAR RB AWAL	18-20 1-29
September	BHADON	JM AWAL JM SANI	4-29 1-4	RB SANI JM AWAL	23-29 1-23	RB SANI JM AWAL	12-30 1-11	RB SANI	1-30	RB AWAL RB SANI	20-30 1-19
October	ASHVIN	JM SANI RAJAB	5-30 1-5	JM AWAL JM SANI	24-30 1-24	JM AWAL JM SANI	12-30 1-12	JM AWAL	1-30	RB SANI JM AWAL	20-30 1-20
November	KATHAK	RAJAB SHABAN	6-29 1-6	JM SANI RAJAB	25-29 1-25	JM SANI RAJAB	13-29 1-13	JM SANI RAJAB	2-29 1-2	JM AWAL JM SANI	21-29 1-21
December	MAGHAR	SHABAN RAMZAN	7-30 1-7	RAJAB SHABAN	26-30 1-26	RAJAB SHABAN	14-30 1-14	RAJAB SHABAN	3-30 1-30	JM SANI RAJAB	22-30 1-22

TABLE 1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS (CONTD.)

Gregorian	Hindu	1960		1959		1958		1957		1956	
		Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates
January	PAUSH	RAJAB	2-30	JM SANI	21-30	JM SANI	10-29	JM AWAL	29	JM AWAL	7-30
		SHABAN	1-2	RAJAB	1-21	RAJAB	1-11	JM SANI	1-30	JM SANI	1-17
February	MAGH	SHABAN	3-29	RAJAB	22-29	RAJAB	12-30	RAJAB	1-28	JM SANI	18-29
		RAMZAN	1-2	SHABAN	1-20	SHABAN	1-9			RAJAB	1-16
March	PHAGUN	RAMZAN	3-30	SHABAN	21-30	SHABAN	10-30	RAJAB	29-30	RAJAB	17-30
		SHAWAL	1-3	RAMZAN	1-21	RAMZAN	1-10	SHABAN	1-29	SHABAN	1-18
April	CHAIT	SHAWAL	4-29	RAMZAN	22-30	RAMZAN	11-30	SHABAN	30	SHABAN	19-29
		ZIQAD	1-4	SHAWAL	1-21	SHAWAL	1-10	RAMZAN	1-29	RAMZAN	1-19
May	BAISAKH	ZIQAD	5-30	SHAWAL	22-29	SHAWAL	11-29	SHAWAL	1-30	RAMZAN	20-30
		ZILHAJ	1-5	ZIQAD	1-23	ZIQAD	1-12	ZIQAD	1-	SHAWAL	1-20
June	JETH	ZILHAJ	6-30	ZIQAD	24-30	ZIQAD	13-30	ZIQAD	2-29	SHAWAL	21-29
		MUHARAM	1-5	ZILHAJ	1-23	ZILHAJ	1-12	ZILHAJ	1-2	ZIQAD	1-21
July	ASHADH	MUHARAM	6-29	ZILHAJ	24-29	ZILHAJ	13-29	ZILHAJ	3-30	ZIQAD	22-30
		SAFAR	1-7	MUHARAM	1-25	MUHARAM	1-14	MUHARAM	1-3	ZILHAJ	1-22
August	SAWAN	SAFAR	8-30	MUHARAM	26-30	MUHARAM	15-30	MUHARAM	4-29	ZILHAJ	23-29
		RB AWAL	1-8	SAFAR	1-26	SAFAR	1-15	SAFAR	1-5	MUHARAM	1-24
September	BHADON	RB AWAL	9-29	SAFAR	27-29	SAFAR	16-29	SAFAR	6-29	MUHARAM	25-29
		RB SANI	1-9	RB AWAL	1-27	RB AWAL	1-16	RB AWAL	1-6	SAFAR	1-25
October	ASHVIN	RB SANI	10-30	RB AWAL	28-30	RB AWAL	17-29	RB AWAL	7-30	SAFAR	26-30
		JM AWAL	1-10	RB SANI	1-28	RB SANI	1-18	RB SANI	1-7	RB AWAL	1-26
November	KATHAK	JM AWAL	11-29	RB SANI	29-	RB SANI	19-30	RB SANI	8-29	RB AWAL	27-29
		RB SANI	1-11	JM AWAL	1-29	JM AWAL	1-18	JM AWAL	1-8	RB SANI	1-27
December	MAGHAR	JM SANI	12-30	JM AWAL	30	JM AWAL	19-29	JM AWAL	9-30	RB SANI	28-30
		RAJAB	1-12	JM SANI	1-29	RB SANI	1-20	JM SANI	1-9	JM AWAL	1-28
				RAJAB	1						

TABLE 1: CONVERTING ISLAMIC MONTHS TO GREGORIAN MONTHS (CONTD.)

Gregorian	Hindu	1955		1954		1953		1952		1951		1950	
		Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates	Months	Dates
January	PAUSH	JM AWAL	6-29	RB SANI	25-29	RB SANI	15-30	RB SANI	3-29	RB AWAL	22-29	RB AWAL	12-30
		JM SANI	1-7	JM AWAL	1-26	JM AWAL	1-15	JM AWAL	1-4	RB SANI	1-23	RB SANI	1-12
February	MAGH	JM SANI	8-30	JM AWAL	27-30	JM AWAL	16-29	JM AWAL	5-30	RB SANI	24-30	RB SANI	13-29
		RAJAB	1-5	JM SANI	1-24	JM SANI	1-14	JM SANI	1-3	JM AWAL	1-21	JM AWAL	1-11
March	PHAGUN	RAJAB	6-30	JM SANI	25-30	JM SANI	15-30	JM SANI	4-29	JM AWAL	22-29	JM AWAL	12-30
		SHABAN	1-6	RAJAB	1-25	RAJAB	1-15	RAJAB	1-5	JM SANI	1-23	JM SANI	1-12
April	CHAIT	SHABAN	7-29	RAJAB	26-29	RAJAB	16-29	RAJAB	6-30	JM SANI	24-30	JM SANI	13-30
		RAMZAN	1-7	SHABAN	1-26	SHABAN	1-16	SHABAN	1-5	RAJAB	1-23	RAJAB	1-12
May	BAISAKH	RAMZAN	8-29	SHABAN	27-29	SHABAN	17-30	SHABAN	6-29	RAJAB	24-29	RAJAB	13-29
		SHAWAL	1-9	RAMZAN	1-28	RAMZAN	1-17	RAMZAN	1-7	SHABAN	1-25	SHABAN	1-14
June	JETH	SHAWAL	10-30	RAMZAN	29-30	RAMZAN	18-29	RAMZAN	8-30	SHABAN	26-30	SHABAN	15-30
		ZIQAD	1-9	SHAWAL	1-28	SHAWAL	1-18	SHAWAL	1-7	RAMZAN	1-25	RAMZAN	1-14
July	ASHADH	ZIQAD	10-29	SHAWAL	29-	SHAWAL	19-29	SHAWAL	8-29	RAMZAN	26-30	RAMZAN	15-30
		ZILHAJ	1-11	ZIQAD	1-29	ZIQAD	1-20	ZIQAD	1-9	SHAWAL	2-26	SHAWAL	1-15
August	SAWAN	ZILHAJ	12-29	ZILHAJ	2-30	ZIQAD	21-30	ZIQAD	10-30	SHAWAL	27-29	SHAWAL	16-29
		MUHARAM	1-13	MUHARAM	1-2	ZILHAJ	1-21	ZILHAJ	1-10	ZIQAD	1-28	ZIQAD	1-17
September	BHADON	MUHARAM	14-30	MUHARAM	3-29	ZILHAJ	22-30	ZILHAJ	11-30	ZIQAD	29-30	ZIQAD	18-30
		SAFAR	1-13	SAFAR	1-3	MUHARAM	1-21	MUHARAM	1-10	ZILHAJ	1-28	ZILHAJ	1-17
October	ASHVIN	SAFAR	14-29	SAFAR	4-30	MUHARAM	22-29	MUHARAM	11-29	ZILHAJ	29	ZILHAJ	18-29
		RB AWAL	1-15	RB AWAL	1-4	SAFAR	1-23	SAFAR	1-12	MUHARAM	1-30	MUHARAM	1-19
November	KATHAK	RB AWAL	16-30	RB AWAL	5-30	SAFAR	24-30	SAFAR	13-30	SAFAR	1-29	MUHARAM	20-29
		RB SANI	1-15	RB SANI	1-4	RB AWAL	1-23	RB AWAL	1-12	RB AWAL	1	SAFAR	1-20
December	MAGHAR	RB SANI	16-30	RB SANI	5-30	RB AWAL	24-30	RB AWAL	13-29	RB AWAL	2-30	SAFAR	21-30
		JM AWAL	1-16	JM AWAL	1-5	RB SANI	1-24	RB SANI	1-14	RB SANI	1-2	RB AWAL	1-21

TABLE 2: HINDU FESTIVALS CORRESPONDING TO GREGORIAN MONTHS

Hindu Festivals	Corresponding Gregorian Months
MAKAR SAKRANTI/PONGAL	January
-	January/February
MAHASHIVRATRI/HOLI	February/March
GUDI PADWA/RAMNAVMI	March/April
-	April/May
-	May/June
NAGAPANCHAMI	June/July
NARIAL PURNIMA/RAKSHA BANDHAN	July/August
JANAMASHTMI/GANAPATI	August/September
DUSSEHRA	September/October
DIWALI	October/November
-	November/December

TABLE 3: THE ISLAMIC MONTHS CORRESPONDING TO MAJOR ISLAMIC FESTIVALS

Islamic Festival	Islamic Month
MUHARRAM	MUHARRAM
ID-UL-FITR	SHAWAL
ID-UL-ZOHA	ZIQAD
SHAB-BE-RAAT	SHABAN
RAMZAN	RAMZAN
MILADUL NABI	RB AWAL

Appendix B

Anthropometry Procedures for NFHS-31

All children born in January 2001 or later as well as all women age 15-49 and men age 15 -54 will be weighed and measured. In the household schedule all eligible women, men and children are listed in Column 9, 10 and 11, respectively, and listed in Column 69 of the Height, Weight and Biomarker Measurement section. The results of the measurements will be recorded in the Columns (73) through (76). The measurement of height and weight (anthropometric measurement) will be completed by the health investigator after all the individual interviews in a household have been completed, but you may need to help. The interviewer will record information on the age and date of birth of children and the age of women and men before the measurements are made. Note that all children under age 6 will be included in Column (69), but only the subset of those children who were born in 2001 or later will be weighed and measured.

PROCEDURES AND PRECAUTIONS BEFORE MEASURING

1. **Layout of the Procedures**

Each step of the measurement procedures is directed at specific participants, who are named in bold letters at the beginning of each step: "**Measurer**" and "**Assistant**".

2. **Two Trained People Required**

Two trained people are required to measure a child's height and length. The measurer holds the child and takes the measurements. The assistant helps hold the child and records the measurements on the questionnaire. If there is an untrained assistant such as the mother, then the trained measurer should also record the measurements on the questionnaire. One person alone can take the weight of a child and record the results if an assistant is not available.

3. **Measuring Board and Scale Placement**

Be selective about where you place the measuring board and scale. It is best to measure outdoors during daylight hours. If it is cold, raining or if too many people congregate and interfere with the measurements, it may be more comfortable to weigh and measure indoors. Make sure there is adequate light.

4. **Age Assessment**

Before you measure, determine the child's age. If the child is less than two years, measure length (that is, with the child is lying down). If the child is two years of age or older, measure height (that is, with the child is standing up). If accurate age is not possible to obtain, measure length if the child is less than 85 cm. Measure height if the child is equal to or greater than 85 cm.

5. **When to Weigh and Measure**

Weigh and measure after you have conducted the individual interviews.

6. **Weigh and Measure One Child at a Time**

If there is more than one eligible child in a household, complete the weighing and measuring

1 This is a slightly revised version of a document on anthropometry procedures prepared by Irwin J. Shorr, MPH, MPS.

of one child at a time. Then proceed with the next eligible child. DO NOT weigh and measure all the children together. If there is more than one eligible woman in a household, weigh and measure her and all her eligible children before proceeding with the next woman. Otherwise measurements may get recorded in the wrong columns of the questionnaire. Return measuring equipment to the storage bags immediately after you complete the measurements for each household.

7. Control the Child

When you weigh and measure, you must control the child. The strength and mobility of even very young children should not be underestimated. Be firm yet gentle with children. Your own sense of calm and self confidence will be felt by the parent and the child.

When a child has contact with any measuring equipment, i.e., on a measuring board you must hold and control the child so the child will not trip or fall. Never leave a child alone with a piece of equipment.

8. Coping with stress

Since weighing and measuring requires touching and handling children, normal stress levels for this type of survey work are higher than for surveys where only verbal information is collected.

Explain the weighing and measuring procedures to the mother or father, and to a limited extent, the child, to help minimize possible resistance, fears or discomfort they may feel. You must determine if the child or the parent is under so much stress that the weighing and measuring must stop. Remember, young children are often uncooperative; they tend to cry, scream, kick and sometimes bite. If a child is under severe stress and is crying excessively, try to calm the child or return the child to the parent before proceeding with the measuring.

Do not weigh or measure a child if:

1. The parent refuses.
2. The child is too sick or distressed.
3. The child is physically deformed which will interfere with or give an incorrect measurement. To be kind, you may want to measure such a child and make a note of the deformity on the questionnaire.

9. Recording Measurements and Being Careful

Keep objects out of your hands and pens out of your mouth, hair or breast pocket when you weigh and measure so that neither the child nor you will get hurt due to carelessness. When you are not using a pen, place it in your equipment pack or on the questionnaire. Make sure you do not have long fingernails. Remove interfering rings and watches before you weigh and measure.

10. Strive for Improvement

You can be an expert measurer if you strive for improvement and follow every step of every procedure the same way every time. The quality and speed of your measurements will improve with practice. You will be required to measure women, men, and children. Do not take these procedures for granted even though they may seem simple and repetitious. It is easy to make errors when you are not careful. Do not omit any steps. Concentrate on what you are doing.

Child Standing Height Measurement Procedure (Illustration 1)

1. Measurer or Assistant: Place the measuring board on a hard, flat surface against a wall, table, tree or staircase. Make sure the measuring board is stable. Many walls and floors are not at perfect right angles; if necessary, place small rocks underneath the height board to stabilize it during the measurement.

2. Measurer or Assistant: Ask the parent to take off the child's shoes and to unbraid or push aside any hair that would interfere with the height measurement. Ask the parent to bring the child to the measuring board and to kneel in front of the child so the child will look forward at the parent.

3. Assistant: Place the questionnaire and pen on the ground (Arrow 1) and kneel on the right side of the child (Arrow 2).

4. Measurer: Kneel on the left of the child (Arrow 3).

5. Assistant: Place the child's knees and feet in the correct position, with knees and feet either together or apart. There are three possible positions for the knees and feet:

- a. Knees together and feet together
 - b. Knees together and feet apart
 - c. Knees apart and feet together
- Whichever touches first!*

6. Measurer: Determine if the child's feet should be against or away from the back of the height board by observing the imaginary line drawn from the tip of the shoulder to the heel, which is called the "mid-axillary line" (Arrow 4). This line should be perpendicular (i.e., 90°) to the base of the height board where the child is standing (you may have to move the child's feet away from the back of the height board to put them in the proper position). Note that with most preschool-age children who are not heavy or obese, the heels will probably touch the back of the height board (Arrow 5).

7. Assistant: With your thumbs against the index finger of each hand, place your right hand on the child's shins (Arrow 6) and your left hand on the child's knees (Arrow 7). Do not wrap your hands around the knees or feet (ankles) or squeeze them together. Make sure the child's legs are straight.

8. Measurer: Ask the child to look straight ahead at the parent if she is kneeling in front of the child. Make sure the child's line of sight is parallel to the ground (Arrow 8). Place your left hand on the child's chin and gradually close your hand (Arrow 9). Note that with most preschool-age children who are not heavy or obese, the back of the head will touch the back of the height board (Arrow 10); however, if the child is heavy or obese, there will be a space between the back of the child's head and the back of the measuring board.

Make sure the child's shoulders are level (Arrow 11), the hands are at the child's side (Arrow 12), and at least the child's buttocks touches the back of the measuring board. Note that with most preschool-age children who are not heavy or obese, the back of the head, the shoulder blades, the buttocks, the calves and heels will touch the back of the measuring board (Arrows 10, 13, 14, 15 & 5).

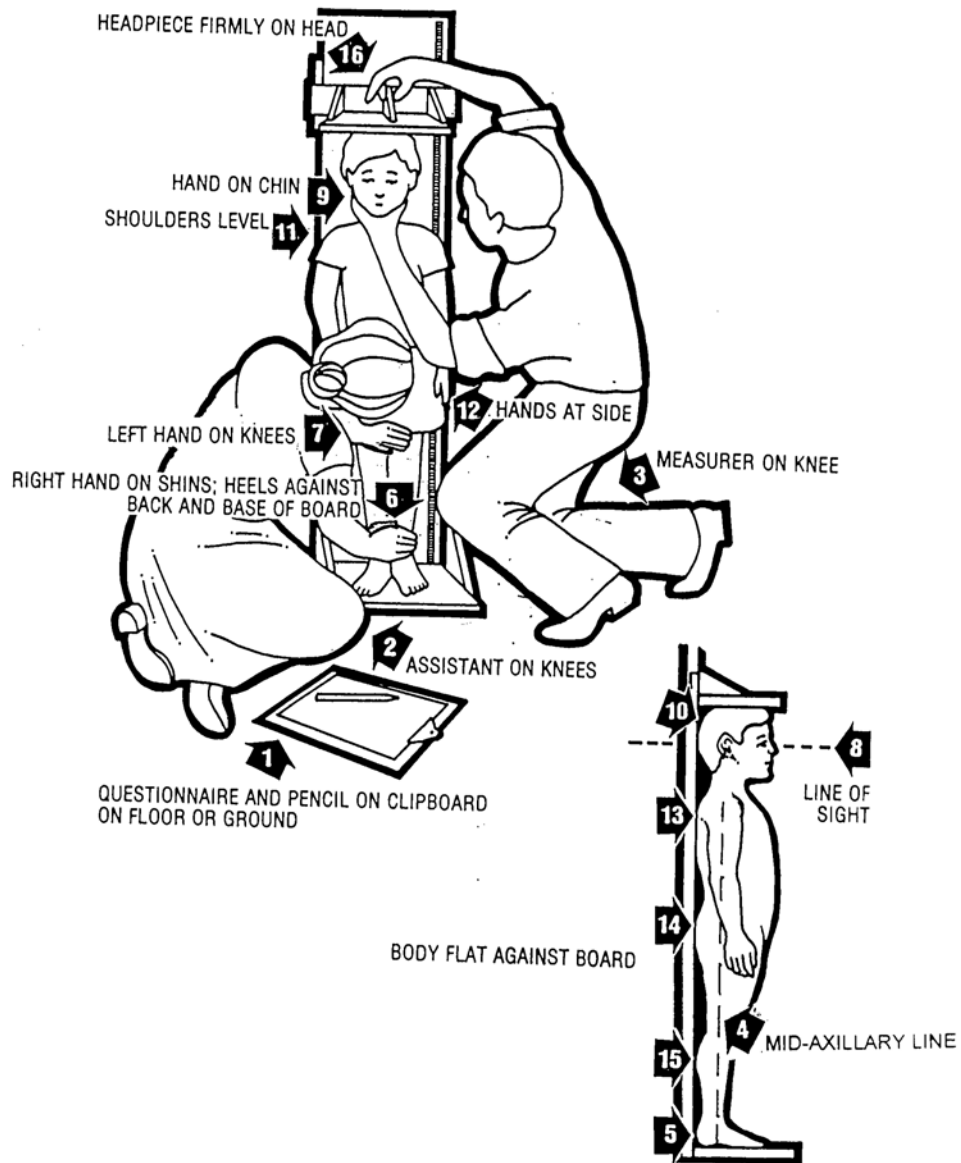
9. Measurer and Assistant: Check the position of the child (Arrows 1-15). Repeat any steps as necessary.

10. Measurer: When the child's position is correct, lower the headpiece on top of the child's head (Arrow 16) making sure to push through the child's hair. Read and call out the measurement to the nearest 0.1 cm. Remove the headpiece from the child's head, your left hand from the child's chin and allow the child to return to the parent.

11. Assistant: Immediately record the measurement on the questionnaire and show it to the measurer.

12. Measurer: Check the recorded measurement on the questionnaire for accuracy and legibility. Instruct the assistant to correct any errors.

Illustration 1
Child Height Measurement

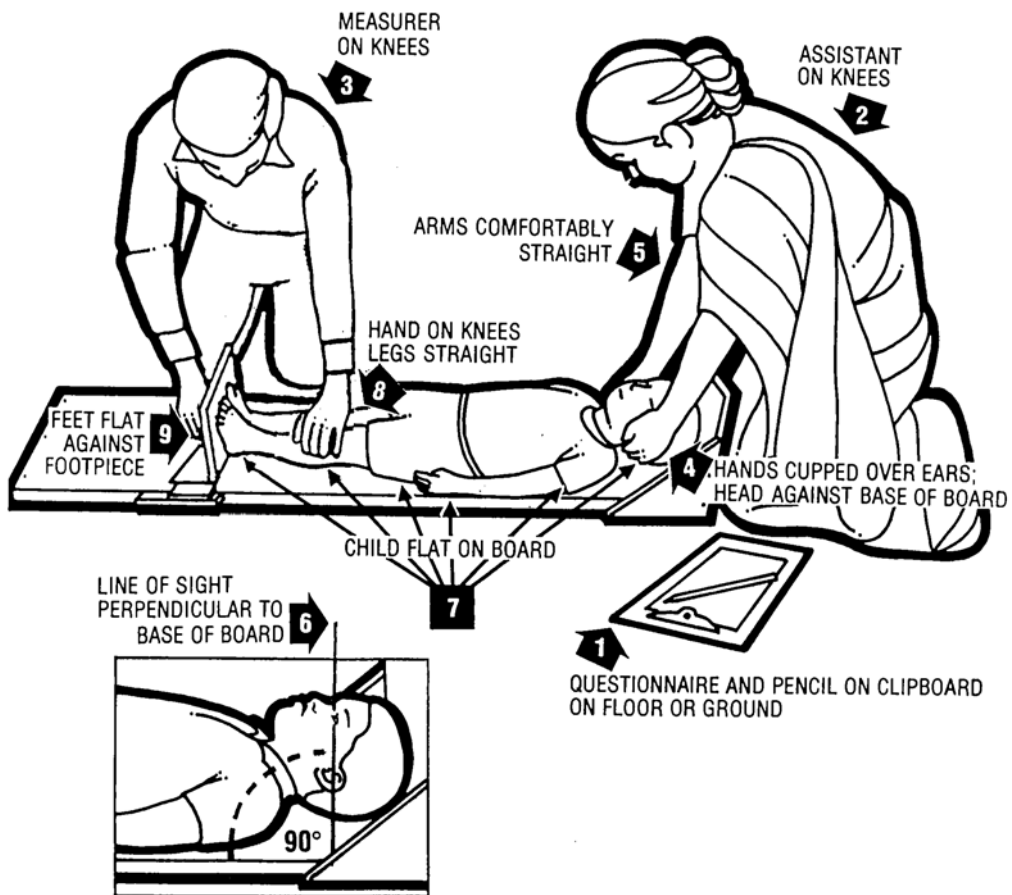


Child Length Measurement Procedure (Illustration 2)

- 1. Measurer or Assistant:** Place the measuring board on a hard, flat surface, such as the ground, floor or a solid table. Make sure the measuring board is stable.
 - 2. Assistant:** Place the questionnaire on the ground, floor or table (Arrow 1) and kneel behind the base of the measuring board if it is on the ground or floor (Arrow 2).
 - 3. Measurer:** Kneel at the right side of the child (at the child's feet) so that you can move the footpiece with your right hand (Arrow 3).
 - 4. Measurer and Assistant:** With the help of the parent, gently lower the child onto the measuring board, making sure the measurer supports the child at the trunk of the body while the assistant supports the child's head.
 - 5. Assistant:** Cup your hands over the child's ears (Arrow 4). With your arms straight (Arrow 5), place the child's head against the base of the board. The child should be looking straight up (Arrow 6) so that the line of sight is perpendicular to the board. Your head should be directly over the child's head. Watch the child's head to make sure it is in the correct position against the base of the board.
 - 6. Measurer:** Make sure the child is lying flat in the centre of the board (Arrow 7). Place the child's knees and feet in the correct position, with knees and feet either together or apart. There are three possible positions for the knees and feet:
 - a. Knees together and feet together
 - b. Knees together and feet apart
 - c. Knees apart and feet together

} *Whichever touches first!*
- With your thumb against your index finger, place your left hand on the child's knees (Arrow 8) and press them gently, but firmly against the board. Do not wrap your hand around the knees or squeeze them together. Make sure the child's legs are straight.
- 7. Measurer:** Check the position of the child (Arrows 1-8). Repeat any steps as necessary.
 - 8. Measurer:** When the child's position is correct, move the footpiece with your right hand until it is firmly against the child's heels (Arrow 9). Read the measurement to the nearest 0.1 cm and call out the measurement to the assistant. Return the child to the parent.
 - 9. Assistant:** Record the measurement on the questionnaire and show it to the assistant for confirmation.
 - 10. Measurer:** Check the recorded measurement on the questionnaire for accuracy and legibility. Instruct the assistant to correct any errors.

Illustration 2
Child Length Measurement



Adult Standing Height Measurement Procedure (Illustration 3)

(NOTE: The standing height of adults can be taken by one person alone, the Measurer).

1. Measurer: Place the measuring board on a hard, flat surface against a wall, table, tree or staircase. Make sure the measuring board is stable. Many walls and floors are not at perfect right angles; if necessary, place small rocks underneath the height board to stabilize it during the measurement.

2. Measurer: Ask the person to take off his/her shoes and ask him/her to unbraid or push aside any hair that would interfere with the height measurement. Ask the person to stand on the base of the height measuring board and to face forward.

3. Measurer: Place the questionnaire and pen on the ground (Arrow 1) and stand on the left side of the person (Arrow 2).

4. Measurer: Determine if the person's feet should be against or away from the back of the height board by observing the imaginary line drawn from the tip of the shoulder to the heel, which is called the "mid-axillary line" (Arrow 3). This line should be perpendicular (i.e., 90°) to the base of the height board where the person is standing. Note that with almost all adults you will have to move the person's feet away from the back of the height board to put them in the proper position; Arrow 4.

5. Measurer: Place the knees and feet in the correct position, with knees and feet either together or apart. There are three possible positions for the knees and feet:

- a. Knees together and feet together
 - b. Knees together and feet apart
 - c. Knees apart and feet together
- Whichever touches first!*

6. Measurer: Ask the person to look straight ahead. Place your left hand on the person's chin and gradually close your hand (Arrow 5). Position the person's head so that the line of sight is parallel to the ground (Arrow 6). Note that with most adults, the back of the head will not touch the back of the height board—there will be a space between the back of the person's head and the back of the measuring board (Arrow 7). After you have placed the person's head in the proper position, release your hand from the person's chin and ask him/her to hold his/her head in the position you have just placed it in.

Make sure the person's shoulders are level (Arrow 8), the hands are at the person's side (Arrow 9), and at least the buttocks touches the back of the measuring board). Note that with most all adults, only the buttocks and perhaps the shoulder blades will touch the back of the measuring board (Arrows 10 & 11).

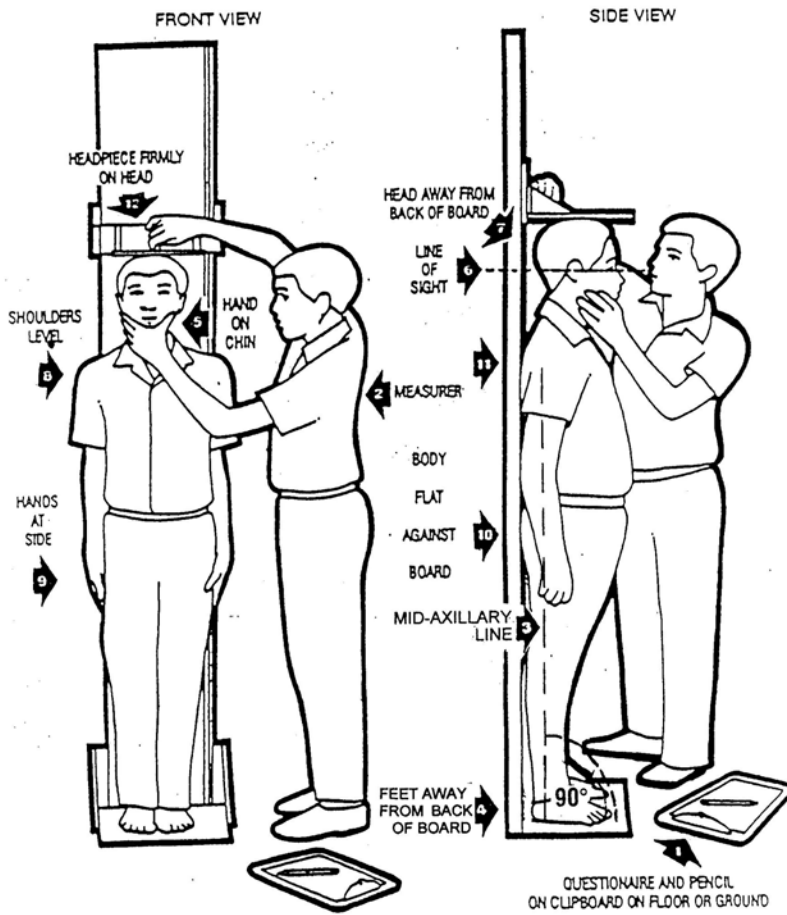
7. Measurer: Check the position of the person (Arrows 1-11). Repeat any steps as necessary.

8. Measurer: When the person's position is correct, lower the headpiece on top of the head (Arrow 12) making sure to push through the person's hair. Read and call out the measurement to the nearest 0.1 cm. Remove the headpiece from the person's head, and escort the person off the height board.

9. Measurer: Immediately record the measurement on the questionnaire.

10. Measurer: Check the recorded measurement on the questionnaire for accuracy and legibility. Correct any errors.

Standing Height of Adults*



* From: "Anthropometry as Part of Household Surveys", I.J. Shorr, The World Bank, Washington, D.C., (in press)

Taking Weight with the UNICEF Electronic Scale (Uniscale)²

1.0 Equipment for Weight

- 1.1 The Uniscale is a digital scale for weighing both children and adults. The scale has a 150 kg capacity and weighs in 0.1 kg increments. The scale is solar powered; therefore, there are no batteries to replace.
- 1.2 Bag with padding to hold the scale

2.0 Preparing the Adult and Children to Take Their Weight

- 2.1 Show the Uniscale to the adult and explain that you will weigh her/him and their children on the scale. Tell her/him that infants and any other children who will not stand on the scale alone can be held by the adult to obtain their weight.
- 2.2 Explain to the adult that she/he will be weighed first, followed by any children, beginning with the youngest child, then the second youngest child, etc.
- 2.3 Ask the adult to wear light clothing while being weighed and to remove any heavy clothing, sandals, shoes, etc.
- 2.4 Ask the adult to undress the child just before taking his/her weight.

3.0 Preparing the Uniscale

- 3.1 As soon as you arrive at a household, take the scale out of the storage bag and place the scale on a hard, level surface. Soft or uneven surfaces may cause the scale to malfunction. The scale needs time to adjust to the temperature where it will be placed for use (see 3.2 below).
- 3.2 The scale must adjust to changes in temperature. If you move the scale to a new site with a different temperature, wait for 15 minutes before using the scale.
- 3.3 The scale will not function correctly if it becomes too warm. It is best to use the scale in the shade or indoors. If the scale becomes hot and does not work correctly, place it in a cooler area and wait 15 minutes before using the scale again.
- 3.4 Handle the scale carefully:
 - Do not drop or bump the scale.
 - Do not weigh a total weight of more than 150 kg.
 - Do not store the scale in direct sunlight or other hot places.
 - Protect the scale against excess humidity or moisture.
 - Do not use the scale at temperatures below 0 degrees C or above 45 degrees C.
 - To clean the scale, wipe surfaces with a damp cloth and dry immediately. Never put the scale in water.
 - Do not store the scale in direct sunlight or other hot places.

² The UNICEF Uniscale is manufactured by Seca Corporation, Munich, Germany. These instructions were adapted from instructions that accompany the Uniscale and revised by Irwin J. Shorr, MPH, MPS.

4.0 Weighing Adults and Children Who Can Stand on the Scale by Themselves

- 4.1 Turn the scale on by covering the solar cells with your fingers for less than one second (the scale will not turn on if the solar cells are covered too long). The display should show the numbers “188.8 first and then after a few seconds should show “0.0.” Wait for the scale to display the numbers “0.0” before asking the adult or child to step on the scale.
- 4.2 Ask the adult or child to step onto the centre of the scale and stand quietly. Immediately after the adult or child steps on the scale, the numbers “1 1” will appear in the display, followed by the weight of the mother or child. Wait until the numbers on the display no longer change and stay fixed in the display. Make sure that the solar cells are not covered by clothing near the adult’s or child’s feet.
- 4.3 The weight will appear in the display. Record the weight to 0.1 kg on the questionnaire.
- 4.4 Use the “Reading and Recording System.”
- 4.5 If you have just weighed an adult and if you are about to weigh an infant or child that must be held to take its weight, then ask the adult to remain on the scale since she will hold the child. If you will next weigh a child who can stand on his/her own, ask the mother to step off the scale and weigh the child by repeating the steps in this section (Section 4.0 above). If you will weigh an infant or child that must be held by an adult, then go to step 5.0.

5.0 Weighing Infants or Children Who Must be Held by an Adult While on the Scale

(NOTE: If it is cold and the adult wants the child to be covered during the weighing, give her/him a blanket or cloth for covering the child AFTER you have recorded her/him weight on the questionnaire. If you do not give the adult a blanket or cloth to cover the child, GO TO STEP 5.1. If you give the adult a blanket or cloth to cover the child, GO TO STEP 5.2.)

5.1 If You Do NOT Give the Adult a Blanket or Cloth to Cover the Child:

- 5.1.1 While the mother is still on the scale, cover the solar cells for one second. The scale will read “0.0.” There will be a small image of a mother holding a baby which means that the scale is ready to weigh the child in the adult’s arms.
- 5.1.2 Give the child to the adult. Wait until the numbers on the display no longer change. The number in the display is the weight of the child only, even though the adult is also standing on the scale.
- 5.1.3 Record the weight of the child to 0.1 kg on the questionnaire.
- 5.1.4 Follow the “Reading and Recording System.”
- 5.1.5 If there is another child to weigh in the adult’s arms, ask the adult to remain on the scale. Take the previous child from her/him and repeat steps 5.1.1 – 5.1.4. *It is very important that you cover the solar cells while the adult is on the scale before weighing each child (i.e., make sure to repeat step 5.1.1 above).*

5.2 If You Give the Adult a Blanket or Cloth to Cover the Child:

- 5.2.1 Ask the adult to step off the scale after you have recorded her/his weight.
- 5.2.2 Give her/him the blanket or cloth and ask her/him to step back on the scale.
- 5.2.3 After the numbers in the display stop moving, cover the solar cells for a second. The scale display will read "0.0". There will be a small image of a mother holding a baby, which means that the scale is ready to weigh the child in the adult's arms.
- 5.2.4 Give the child to the adult. Wait until the numbers on the display no longer change. The number in the display is the weight of the child only, even though the adult is also standing on the scale.
- 5.2.5 Record the weight of the child to 0.1 kg on the questionnaire.
- 5.2.6 Follow the "Reading and Recording System."
- 5.2.7 If there is another child to weigh in the adult's arms, ask the adult to remain on the scale. Take the previous child from her/him and repeat steps 5.2.1 – 5.2.7. *It is very important that you cover the solar cells while the adult is on the scale before weighing each child (i.e., make sure to repeat step 5.2.3 above).*

5.3 If You Weigh an Infant Who Weighs Less Than 2.0 kg:

If no weight is displayed in the panel when an adult holds a very small baby while on the scale, follow these steps:

- 5.3.1 Ask the adult if you can hold her baby for a moment.
- 5.3.2 Ask the adult to step on the scale.
- 5.3.3 Cover the solar cells with your fingers for one second. The display should read "0.0" and a small image of a mother holding a child should be displayed next to the "0.0".
- 5.3.4 Ask the adult to step off the scale.
- 5.3.5 Give the baby to the adult.
- 5.3.6 Ask the adult to step back on the scale.
- 5.3.7 The weight of the baby only should appear in the display panel. Make sure to wait for the numbers to stop moving before recording the weight on the questionnaire.
- 5.3.8 Record the weight of the baby on the questionnaire to 0.1 kg.

6.0 Additional Notes on the Uniscale:

- 6.1 The Uniscale switches off automatically two minutes after the last weighing.
- 6.2 If there is too much movement on the scale during measurement, the display will fluctuate between “1.” and “.1” (i.e., these numbers will keep moving) until the load on the scale becomes stable.
- 6.3 Do not weigh loads with a total weight of more than 150 kg.
- 6.4 Possible reasons for the scale not taring [returning to zero (“0.0”) after covering the solar cells when the adult stands on the scale]:
- 6.4.1 There was no weight on the scale to tare (i.e., the adult was not on the scale).
 - 6.4.2 The solar cell was not covered completely.
 - 6.4.3 The solar cell was covered for more than one second; try covering it for less than one second.
 - 6.4.4 It was too dark; put the scale in a place with brighter light.
 - 6.4.5 The load weighs more than 120 kg; use a lighter load.
- 6.5 What to do if the Scale Display Shows the Following Error Messages:

E01:

The scale has to readjust itself. Ask the adult to step off the scale and wait until E01 no longer appears.

E02 and switches off automatically:

Be sure that there is nothing on the scale and try to start the scale again by covering the solar cells with your fingers for one second.

E03 and switches off automatically:

It is either too hot or too cold for the scale to function. Move the scale to a different place where the temperature is between 0 and 45 degrees C; then start the scale by covering the solar cells with your fingers for one second.

E04 after measuring:

The load is too heavy (more than 150 kg). Ask the adult to step off the scale. If the load cannot be reduced, the weight cannot be taken.

E05 for a few seconds after trying to start the tare function:

The load is too heavy for taring (i.e., more than 120 kg). Ask the adult to step off the scale. If the adult weighs more than 120 kg, then the tare function cannot be used.